

Dental Practice Act and California Code of Regulations, Title 16

**Compiled by the State Committee on Dental Auxiliaries
1428 Howe Avenue, Sacramento, CA 95825**

Includes changes through June 5, 2003

6/2003 Changes: Regulation 1073.2 – RDHAP Educational Programs

5/2003 Changes: Regulation Sections 1070, 1070.1, and 1070.2 – RDA Programs

4/2003 Changes: Regulation Section 1017 – CE Requirements

4/2003 Additions: Table of Allowable Duties

Originally published February 24, 2003

**This publication will be updated as changes occur, with revisions available on the
internet at www.comda.ca.gov**

DENTAL PRACTICE ACT
(Business and Professions Code Section 1600
Et. Seq.)
Division 2, Healing Arts

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**Business and Professions Code
Division 2. Healing Arts
Chapter 4. Dentistry**

Article 1. Administration

1600. Title

This chapter constitutes the chapter on dentistry of the Business and Professions Code. It may be known and cited as the Dental Practice Act.

Whenever a reference is made to the Dental Practice Act by the provisions of any statute, it shall be construed as referring to the provisions of this chapter.

1601.1. Board Organization; Authority

(a) There shall be in the Department of Consumer Affairs the Dental Board of California in which the administration of this chapter is vested. The board shall consist of eight practicing dentists, one registered dental hygienist, one registered dental assistant, and four public members. Of the eight practicing dentists, one shall be a member of a faculty of any California dental college and one shall be a dentist practicing in a nonprofit community clinic. The appointing powers, described in Section 1603, may appoint to the board a person who was a member of the prior board. The board shall be organized into standing committees dealing with examinations, enforcement, and other subjects as the board deems appropriate.

(b) For purposes of this chapter, any reference in this chapter to the Board of Dental Examiners shall be deemed to refer to the Dental Board of California.

(c) The board shall have all authority previously vested in the existing board under this chapter. The board may enforce all disciplinary actions undertaken by the previous board.

(d) This section shall become operative on January 1, 2002.

(e) This section shall become inoperative on July 1, 2004, and, as of January 1, 2005, is repealed, unless a later enacted statute that is enacted before January 1, 2005, deletes or extends the dates on which it becomes inoperative and is repealed. The repeal of this section renders the board subject to the review required by Division 1.2 (commencing with Section 473).

1601.2. Protection of the Public

Protection of the public shall be the highest priority for the Dental Board of California in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be

promoted, the protection of the public shall be paramount.

1601.3. Dental board enforcement monitor

(a) (1) The Director of Consumer Affairs shall appoint a dental board enforcement program monitor no later than March 31, 2002. The director may retain a person for this position by a personal services contract, the Legislature hereby finding, pursuant to Section 19130 of the Government Code, that this is a new state function.

(2) The director shall supervise the enforcement program monitor and may terminate or dismiss him or her from this position.

(b) (1) The enforcement program monitor shall monitor and evaluate the dental disciplinary system and procedures, with specific concentration on improving the overall efficiency of the enforcement program. The director shall specify further duties of the program monitor.

(2) The monitoring duty shall be on a continuing basis for a period of no more than two years from the date of the enforcement program monitor's appointment and shall include, but not be limited to, improving the quality and consistency of complaint processing and investigation and reducing the timeperiods for each, reducing any complaint backlog, assuring consistency in the application of sanctions or discipline imposed on licensees, and shall include the following areas: the accurate and consistent implementation of the laws and rules affecting discipline, staff concerns regarding disciplinary matters or procedures, appropriate utilization of licensed professionals to investigate complaints, the board's cooperation with other governmental entities charged with enforcing related laws and regulations regarding dentists.

(3) The enforcement program monitor shall exercise no authority over the board's discipline operations or staff. However, the board and its staff shall cooperate with him or her, and the board shall provide data, information, and case files as requested by the enforcement program monitor to perform all of his or her duties.

(4) The director shall assist the enforcement program monitor in the performance of his or her duties, and the enforcement program monitor shall have the same investigative authority as the director.

(c) The enforcement program monitor shall submit an initial written report of his or her findings and conclusions to the board, the department, and the Legislature no later than September 1, 2002, and every six months thereafter, and be available to make oral reports to each, if requested to do so.

The enforcement program monitor may also provide additional information to either the department or the Legislature at his or her discretion or at the request of either the department or the Legislature. The enforcement program monitor shall make his or her reports available to the public or the media. The enforcement program monitor shall make every effort to provide the board with an opportunity to reply to any facts, findings, issues, or conclusions in his or her reports with which the board may disagree.

(d) The board shall pay for all of the costs associated with the employment of an enforcement program monitor.

(e) This section shall become inoperative on March 31, 2004, and as of January 1, 2005, is repealed, unless a later enacted statute, that is enacted before January 1, 2005, deletes or extends the dates on which it becomes inoperative and is repealed.

1601.5. "Practicing dentist"

For purposes of Section 1601, "practicing dentist" includes a member of a faculty of any dental college or dental department of any medical college in the State of California.

1602. Membership qualification

All of the members of the board, except the public members, shall have been actively and legally engaged in the practice of dentistry in the State of California, for at least five years next preceding the date of their appointment. The dental hygienist member shall have been a registered dental hygienist, and the dental assistant member shall have been a registered dental assistant, in the State of California for at least five years next preceding the date of their appointment. The public members shall not be licentiates of the board or of any other board under this division or of any board referred to in Sections 1000 and 3600. No more than one member of the board shall be a member of the faculty of any dental college or dental department of any medical college in the State of California. None of the members, including the public members, shall have any financial interest in any such college.

1603. Appointment and terms; Vacancies

Except for the initial appointments, members of the board shall be appointed for a term of four years, and each member shall hold office until the appointment and qualification of his or her successor or until one year shall have elapsed since the expiration of the term for which he or she was appointed, whichever first occurs.

A vacancy occurring during a term shall be filled by appointment for the unexpired term, within 30 days after it occurs.

No person shall serve as a member of the board for more than two terms.

The Governor shall appoint two of the public members, the dental hygienist member, the dental assistant member, and the eight licensed dentist members of the board. The Senate Rules Committee and the Speaker of the Assembly shall each appoint a public member.

Of the initial appointments, one of the dentist members and one of the public members appointed by the Governor shall serve for a term of one year. Two of the dentist members appointed by the Governor shall each serve for a term of two years. One of the public members and two of the dentist members appointed by the Governor shall each serve a term of three years. The dental hygienist member, the dental assistant member, and the remaining three dentists members appointed by the Governor shall each serve for a term of four years. The public members appointed by the Senate Committee on Rules and the Speaker of the Assembly shall each serve for a term of four years.

1603a. Reappointments

A member of the Board of Dental Examiners who has served two terms shall not be eligible for reappointment to the board. In computing two terms hereunder, that portion of an unexpired term which a member fills as a result of a vacancy shall be excluded.

1604. Members' addresses

Each member of the board, upon his or her qualification, shall file with the executive officer his or her post office address, and thereafter any notice of any change thereof. Any notice mailed to the address so on file, shall be deemed to comply with the requirements of this chapter as to notice to that member of the board.

1605. Removal from office

The Governor has power to remove from office at any time any member of the board for continued neglect of duty required by this chapter or for incompetency or unprofessional or dishonorable conduct.

1606. Election of officers

The board shall elect a president, a vice president and a secretary from its membership. This section controls over the provisions of section 107 of this code with respect to the selection of officers.

1607. Regular meetings

The board shall meet regularly once each year in San Francisco and once each year in Los Angeles after the commencement of the dental schools for the purpose of examining applicants, and at such other times and places as the board may designate, for the purpose of transacting its business.

1608. Special meetings

Special meetings may be held at such times as the board may elect, or on the call of the president of the board, or of not less than four members thereof. A written notice of the time, place, and object of the special meeting shall be mailed by the executive officer to all the members not parties to the call, at least 15 days before the day of the meeting.

1609. Meetings by unanimous consent

Meetings may be held at any time and place by unanimous consent evidenced either by writing or by the presence of any member whose consent is necessary.

1610. Quorum

Eight members of the board shall constitute a quorum for the transaction of business at any meeting.

1611. Duties generally

The board shall carry out the purposes and enforce the provisions of this chapter. It shall examine all applicants for a license to practice dentistry according to the provisions of this chapter and shall issue licenses to practice dentistry in this State to such applicants as successfully pass the examination of the board and otherwise comply with the provisions of this chapter. The board shall collect and apply all fees as directed by this chapter.

1611.5. Inspection of records/premises

The board may inspect the books, records, and premises of any dentist licensed under this chapter in response to a complaint that a licensee has violated any law or regulation that constitutes grounds for disciplinary action by the board, and may employ inspectors for this purpose.

A licensee's failure to allow an inspection or any part thereof shall be grounds for suspension or revocation of the license in accordance with Section 1670.

1612. Records

The board shall keep a record of the names of all persons to whom licenses have been granted by it

to practice dentistry, and such other records as may be necessary to show plainly all of its acts and proceedings.

1613. Seal

The board shall have and use a seal bearing the name "Board of Dental Examiners of California."

1614. Rule-making authority

The board may adopt reasonably necessary rules not inconsistent with the provisions of this chapter concerning:

- (a) The holding of meetings.
- (b) The holding of examinations.
- (c) The manner of issuance and reissuance of licenses.

(d) The establishment of standards for the approval of dental colleges.

(e) Prescribing subjects in which applicants are to be examined.

(f) The administration and enforcement of this chapter.

Such rules shall be adopted, amended, or repealed in accordance with the provisions of the Administrative Procedure Act.

1615. Compensation and expenses

Each member of the board shall receive a per diem and expenses as provided in Section 103.

The secretary shall be entitled to traveling and other expenses necessary in the performance of his duties.

The secretary shall not receive a salary for acting in such capacity.

1616. Employment, compensation of assistants

The board shall have full power to employ all necessary investigators, clerical and other assistants and appoint its own attorney, prescribe his duties and fix his compensation. Members and employees of the board shall be entitled to other necessary traveling expenses. The investigators employed by the board shall be specifically trained to investigate dental practice activities.

1616.5. Appointment of executive officer

(a) The board, by and with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter.

(b) This section shall become operative on January 1, 2002.

(c) This section shall become inoperative on July 1, 2004, and, as of January 1, 2005, is repealed,

unless a later enacted statute that is enacted before January 1, 2005, deletes or extends the dates on which it becomes inoperative and is repealed.

1617. Evidentiary effect of certified copies

A copy of any part or all of the books of the board duly certified by the executive officer shall be primary evidence in any court of this state.

1618. Storage and inspection of records

The original books, records, and papers of the board shall be kept at the office of the executive officer, which shall be at such place as may be designated by the board.

The executive officer shall furnish to any person making application therefor a copy of any part thereof, certified by him or her as executive officer, upon payment of the fee specified in Section 163. The fee shall be deposited in the State Treasury to the credit of the board.

1618.5. Accusation relating to quality of care of health care services plan

(a) The board shall provide to the Director of the Department of Managed Health Care a copy of any accusation filed with the Office of Administrative Hearings pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, when the accusation is filed, for a violation of this chapter relating to the quality of care of any dental provider of a health care service plan, as defined in Section 1345 of the Health and Safety Code. There shall be no liability on the part of, and no cause of action shall arise against, the State of California, the Board of Dental Examiners, the Department of Managed Health Care, the director of that department, or any officer, agent, employee, consultant, or contractor of the state or the board or the department for the release of any false or unauthorized information pursuant to this section, unless the release is made with knowledge and malice.

(b) The board and its executive officer and staff shall maintain the confidentiality of any nonpublic reports provided by the Director of the Department of Managed Health Care pursuant to subdivision (i) of Section 1380 of the Health and Safety Code.

1619. Inspection/destruction of exam papers

The examination papers of any applicant shall be kept for the period of one year and may then be destroyed, but they shall be open to inspection only by members of the board, by the applicant or by someone appointed by the latter to inspect them, by a court of competent jurisdiction in a proceeding where the question of the contents of

the papers is properly involved, or by the director in accordance with Section 110 or 153.

1619.1. Retention of examination papers

Notwithstanding Section 1619, the board need not retain the National Board of Dental Examiners' examination papers.

1620.1. Auxiliary of scope of practice review

The Department of Consumer Affairs, in conjunction with the board and the Joint Legislative Sunset Review Committee, shall review the scope of practice for dental auxiliaries. The department shall employ the services of an independent consultant to perform this comprehensive analysis. The department shall be authorized to enter into an interagency agreement or be exempted from obtaining sole source approval for a sole source contract. The board shall pay for all of the costs associated with this comprehensive analysis. The department shall report its findings and recommendations to the Legislature by September 1, 2002.

1621. Use of examiners; Criteria

The board shall utilize in the administration of its licensure examinations only examiners whom it has appointed and who meet the following criteria:

(a) Possession of a valid license to practice dentistry in this state or possession of a valid license in one of the following dental auxiliary categories: registered dental assistant, registered dental assistant in extended functions, registered dental hygienist, registered dental hygienist in extended functions, or registered dental hygienist in alternative practice.

(b) Practice as a licensed dentist or in a dental auxiliary licensure category for at least five years preceding his or her appointment.

(c) Hold no position as an officer or faculty member at any college, school, or institution that provides dental instruction in the same licensure category as that held by the examiner.

Article 2. Admission and Practice

1625. Practitioners of dentistry

Dentistry is the diagnosis or treatment, by surgery or other method, of diseases and lesions and the correction of malpositions of the human teeth, alveolar process, gums, jaws, or associated structures; and such diagnosis or treatment may include all necessary related procedures as well as the use of drugs, anesthetic agents, and physical evaluation. Without limiting the foregoing, a person practices dentistry within the meaning of

this chapter who does any one or more of the following:

(a) By card, circular, pamphlet, newspaper or in any other way advertises himself or represents himself to be a dentist.

(b) Performs, or offers to perform, an operation or diagnosis of any kind, or treats diseases or lesions of the human teeth, alveolar process, gums, jaws, or associated structures, or corrects malposed positions thereof.

(c) In any way indicates that he will perform by himself or his agents or servants any operation upon the human teeth, alveolar process, gums, jaws, or associated structures, or in any way indicates that he will construct, alter, repair, or sell any bridge, crown, denture or other prosthetic appliance or orthodontic appliance.

(d) Makes, or offers to make, an examination of, with the intent to perform or cause to be performed any operation on the human teeth, alveolar process, gums, jaws, or associated structures.

(e) Manages or conducts as manager, proprietor, conductor, lessor, or otherwise, a place where dental operations are performed.

1626. Exempt practices

It is unlawful for any person to engage in the practice of dentistry in the state, either privately or as an employee of a governmental agency or political subdivision, unless the person has a valid, unexpired license or special permit from the board.

The following practices, acts and operations, however, are exempt from the operation of this chapter:

(a) The practice of oral surgery by a physician and surgeon licensed under the Medical Practice Act.

(b) The operations by bona fide students of dentistry or dental hygiene in the clinical departments or the laboratory of a reputable dental college approved by the Board of Dental Examiners, including operations by unlicensed students while engaged in dental extension programs which have been approved by a school of dentistry, and approved by the Board of Dental Examiners, and which are offered by the educational institution comprising the approved school of dentistry, and which are under the general programmatic and academic supervision of that school of dentistry.

(c) The practice of dentistry by licensed dentists of other states or countries while appearing and operating as bona fide clinicians or instructors in dental colleges approved by the Board of Dental Examiners.

(d) The practice of dentistry by licensed dentists of other states or countries in conducting or making

a clinical demonstration before any bona fide dental or medical society, association or convention; provided, however, the consent of the Board of Dental Examiners to the making and conducting of the clinical demonstration must be first had and obtained.

(e) The construction, making, verification of shade taking, alteration or repairing of bridges, crowns, dentures, or other prosthetic appliances, or orthodontic appliances, when the casts or impressions for this work have been made or taken by a licensed dentist, but a written authorization signed by a licensed dentist shall accompany the order for the work or it shall be performed in the office of a licensed dentist under his or her supervision. The burden of proving written authorization or direct supervision is upon the person charged with the violation of this chapter.

It is unlawful for any person acting under the exemption of this subdivision (e) to represent or hold out to the public in any manner that he or she will perform or render any of the services exempted by this subdivision that are rendered or performed under the provisions of this chapter by a licensed dentist, including the construction, making, alteration or repairing of dental prosthetic or orthodontic appliances.

(f) The manufacture or sale of wholesale dental supplies.

(g) The practice of dentistry or dental hygiene by applicants during a licensing examination conducted in this state by the licensing agency of another state which does not have a dental school; provided, however, that the consent of the board to the conducting of the examination shall first have been obtained and that the examination shall be conducted in a dental college accredited by the board.

(h) The practice by personnel of the Air Force, Army, Coast Guard, or Navy or employees of the United States Public Health Service, Veterans' Administration, or Bureau of Indian Affairs when engaged in the discharge of official duties.

1626.5. (First of two) Acupuncture services

(a) A licensed dentist, or group of dentists, or dental corporation shall not share in any fee charged by a person for performing acupuncture or receive anything of value from or on behalf of such acupuncturist for any referral or diagnosis.

(b) A licensed dentist shall not employ more than one person to perform acupuncture services.

(c) A group of dentists or a dental corporation shall not employ more than one person to perform acupuncture services for every 20 dentists in such group or corporation.

1626.5. (Second of two) Exemptions

In addition to the exemptions set forth in Section 1626, the operations by bona fide students of registered dental assisting, registered dental assisting in extended functions, and registered dental hygiene in extended functions in the clinical departments or the laboratory of an educational program or school approved by the board, including operations by unlicensed students while engaged in clinical externship programs that have been approved by an approved educational program or school, and that are under the general programmatic and academic supervision of that educational program or school, are exempt from the operation of this chapter.

1627. Continuation of license

The license of any dentist, existing at the time of the passage of this chapter, shall continue in force until it expires or is forfeited in the manner provided by this chapter.

1627.5. Liability for emergency care

No person licensed under this chapter, who in good faith renders emergency care at the scene of an emergency occurring outside the place of that person's practice, or who, upon the request of another person so licensed, renders emergency care to a person for a complication arising from prior care of another person so licensed, shall be liable for any civil damages as a result of any acts or omissions by that person in rendering the emergency care.

1627.7. Exemption of dentist from liability for damages for injury or death caused in emergency situation occurring in hospital or office; Failure to inform patient of possible consequences of dental procedure

(a) A dentist shall not be liable for damages for injury or death caused in an emergency situation occurring in the dentist's office or in a hospital on account of a failure to inform a patient of the possible consequences of a dental procedure where the failure to inform is caused by any of the following:

- (1) The patient was unconscious.
- (2) The dental procedure was undertaken without the consent of the patient because the dentist reasonably believed that a dental procedure should be undertaken immediately and that there was insufficient time to fully inform the patient.
- (3) A dental procedure was performed on a person legally incapable of giving consent, and the dentist reasonably believed that a dental procedure should be undertaken immediately and that there was insufficient time to obtain the

informed consent of a person authorized to give such consent for the patient.

(b) This section is applicable only to actions for damages for injuries or death arising because of a dentist's failure to inform, and not to actions for such damages arising because of a dentist's negligence in rendering or failing to render treatment.

(c) As used in this section:

(1) "Dentist" means a person licensed as a dentist pursuant to this chapter.

(2) "Emergency situation occurring in a hospital" means a situation occurring in a hospital, whether or not it occurs in an emergency room, requiring immediate services for alleviation of severe pain or immediate diagnosis and treatment of unforeseeable dental conditions, which, if not immediately diagnosed and treated, would lead to serious disability or death.

(3) "Hospital" means a licensed general acute care hospital as defined in subdivision (a) of Section 1250 of the Health and Safety Code.

(4) "Emergency situation occurring in the dentist's office" means a situation occurring in an office, other than a hospital, used by the dentist for the examination or treatment of patients, requiring immediate services for alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable dental conditions, which, if not immediately diagnosed and treated, would lead to serious disability or death.

1628. (First of two; Operative until January 1, 2004) Examination eligibility

Any person over 18 years of age is eligible to take an examination before the board upon making application therefor and meeting all of the following requirements:

(a) Paying the fee for applicants for examination provided by this chapter.

(b) Furnishing satisfactory evidence of having graduated from a reputable dental college, which shall have been approved by the board; provided, also, that applicants furnishing evidence of having graduated after 1921 shall also present satisfactory evidence of having completed at dental school or schools the full number of academic years of undergraduate courses required for graduation.

(c) Furnishing the satisfactory evidence of financial responsibility or liability insurance for injuries sustained or claimed to be sustained by a dental patient in the course of the examination as a result of the applicant's actions.

(d) This section shall remain in effect only until January 1, 2004, and as of that date is repealed, unless a later enacted statute, that is enacted

before January 1, 2004, deletes or extends that date.

1628. (Second of two; Operative January 1, 2004) Applicant with degree from foreign dental school

Any person over 18 years of age is eligible to take an examination before the board upon making application therefor and meeting all of the following requirements:

- (a) Paying the fee for applicants for examination provided by this chapter.
- (b) Furnishing satisfactory evidence of having graduated from a reputable dental college, which shall have been approved by the board; provided, also, that applicants furnishing evidence of having graduated after 1921 shall also present satisfactory evidence of having completed at dental school or schools the full number of academic years of undergraduate courses required for graduation.
- (c) Furnishing the satisfactory evidence of financial responsibility or liability insurance for injuries sustained or claimed to be sustained by a dental patient in the course of the examination as a result of the applicant's actions.
- (d) If the applicant has been issued a degree of doctor of dental medicine or doctor of dental surgery by a foreign dental school, he or she shall furnish all of the following documentary evidence to the board:

(1) That he or she has completed in a dental school or schools approved by the board pursuant to Section 1636.4, a resident course of professional instruction in dentistry for the full number of academic years of undergraduate courses required for graduation.

(2) Subsequent thereto, he or she has been issued by the approved dental school, a dental diploma or a dental degree, as evidence of the completion of the course of dental instruction required for graduation.

(e) Any applicant, who has been issued a dental diploma from a foreign dental school, which has not been approved by the board pursuant to Section 1636.4 at the time of his or her graduation from the school, shall not be eligible for examination until the applicant has successfully completed a minimum of two academic years of education at a dental college approved by the board pursuant to Article 1 (commencing with Section 1024) of Chapter 2 of Division 10 of Title 16 of the California Code of Regulations. This subdivision shall not apply to applicants who have successfully completed the requirements of Section 1636 on or before December 31, 2002.

(f) This section shall become operative on January 1, 2004.

1628.5. Denial of examination applications

The board may deny an application to take an examination for licensure as a dentist or dental auxiliary or an application for registration as a dental corporation, or, at any time prior to licensure, the board may deny the issuance of a license to an applicant for licensure as a dentist or dental auxiliary, if the applicant has done any of the following:

- (a) Committed any act which would be grounds for the suspension or revocation of a license issued pursuant to this code.
- (b) Committed any act or been convicted of a crime constituting grounds for denial of licensure or registration under Section 480.
- (c) While unlicensed, committed, or aided and abetted the commission of, any act for which a license is required by this chapter.
- (d) Suspension or revocation of a license issued by another state or territory on grounds which would constitute a basis for suspension or revocation of licensure in this state.

The proceedings under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

1628.7. Probationary license

(a) The board may, upon an applicant's successful completion of the board examination, in its sole discretion, issue a probationary license to an applicant for licensure as a dentist or dental auxiliary. The board may require, as a term or condition of issuing the probationary license, the applicant to do any of the following, including, but not limited to:

- (1) Successfully complete a professional competency examination.
- (2) Submit to a medical or psychological evaluation.
- (3) Submit to continuing medical or psychological treatment.
- (4) Abstain from the use of alcohol or drugs.
- (5) Submit to random fluid testing for alcohol or controlled substance abuse.
- (6) Submit to continuing participation in a board approved rehabilitation program.
- (7) Restrict the type or circumstances of practice.
- (8) Submit to continuing education and coursework.

(9) Comply with requirements regarding notification to employer and changes of employment.

(10) Comply with probation monitoring.

(11) Comply with all laws and regulations governing the practice of dentistry.

(12) Limit practice to a supervised structured environment in which the licensee's activities shall be supervised by another dentist.

(13) Submit to total or partial restrictions on drug prescribing privileges.

(b) The probation shall be for three years and the licensee may petition the board for early termination, or modification of a condition of, the probation in accordance with subdivision (b) of Section 1686.

(c) The proceeding under this section shall be conducted in accordance with the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

1629. Character investigations

(a) Any member of the board may inquire of any applicant for examination concerning his or her qualifications or experience and may take testimony of anyone in regard thereto, under oath, which he or she is hereby empowered to administer.

(b) Each applicant for licensure under this chapter shall furnish fingerprint cards for submission to state and federal criminal justice agencies, including, but not limited to, the Federal Bureau of Investigation, in order to establish the identity of the applicant and in order to determine whether the applicant has a record of any criminal convictions in this state or in any other jurisdiction, including foreign countries. The information obtained as a result of the fingerprinting of the applicant shall be used in accordance with Section 11105 of the Penal Code, and to determine whether the applicant is subject to denial of licensure pursuant to Division 1.5 (commencing with Section 475) or Section 1628.5.

1630. Examinations

The examination by the board of applicants for a license to practice dentistry in this State shall be sufficiently thorough to test the fitness of the applicant to practice dentistry, and both questions and answers shall be written in the English language.

1631. Examination subjects

The subjects in which the applicant shall be examined shall be those subjects as the board

may from time to time prescribe. However, the subjects of examination shall be selected in accordance with the trend of dental education in California as that trend is determined, from time to time by the curricula of the dental colleges in California approved by the Board of Dental Examiners, and no examination shall be given on any subject which is not then, at the time of the determination, being currently taught in those approved dental colleges. In the event of any changes in the list of examination subjects, all approved dental schools in the United States shall be notified, by the executive officer of the board, at least two years in advance of the effective date of any change or changes in subjects. Each applicant, at the time of filing of application to take any examination hereunder, shall be given a list of the subjects of the examination for which he or she is making application.

1632. Practical demonstrations

Each applicant shall give clinical demonstrations of his or her skill in operative dentistry, prosthetic dentistry, and diagnosis and treatment in periodontics. The applicant shall also give written demonstrations of his or her judgment in diagnosis-treatment planning, prosthetic dentistry, and endodontics. The examination may include an examination in California law and ethics.

1632.5. Required remedial study

Notwithstanding Section 135, on and after January 1, 1993, an applicant who fails to pass the examination required by Section 1632 after three attempts shall not be eligible for further reexamination until the applicant has successfully completed a minimum of 50 hours of education for each subject which the applicant failed in the applicant's last unsuccessful examination. The coursework shall be taken at a dental school approved by either the Commission on Dental Accreditation or a comparable organization approved by the board, and shall be completed within a period of one year from the date of notification of the applicant's third failure. The coursework shall be required once for every three unsuccessful examination attempts. When the applicant applies for reexamination, he or she shall furnish proof satisfactory to the board that he or she has successfully completed the requirements of this section.

1633. Subjects exempt from reexamination

When an applicant for a license has received a grading of 85 percent or above in any given subject, he or she shall be exempt from reexamination on that subject in subsequent

examinations before the board within two years after the examination on which the applicant received the exemption.

In December 1987, the board shall arrange for an independent, objective evaluation to be performed regarding the dental licensure examination, the costs of which shall be paid for by the board.

The evaluation report shall be addressed to the Legislature and shall include at least the following items:

(a) A complete description of the board's grading policies and examination scoring procedures used for the years 1984 to 1987, inclusive.

(b) Using standard methods of test validation, an analysis of the degree to which the new licensure examination, established in 1984 by the board, is an improvement over the previous examination used by the board in 1982 and 1983.

(c) A statistical distribution of the percentage of candidates' scores in the different scoring categories used by the board from 1981 to 1987, inclusive, to grade the performance of candidates on the examination.

(d) A statistical comparison of the final scores and scores for each section of the examination for candidates taking the licensure examination for the years 1981 to 1987, inclusive.

(e) An analysis of the statistical validity and reliability of the licensure examination, and of the appropriateness of the scoring procedures and grading policies used by the board.

(f) A statistical analysis of the relationship, if any, between the candidates' final scores and section scores and the candidates' age, sex, ethnicity, and educational background for the years 1981 to 1987, inclusive.

1633.5. National Board written examination

Notwithstanding any other provision of this chapter, the board shall require each applicant to successfully complete the National Board of Dental Examiners' written examination. Successful passage of the National Board of Dental Examiners' written examination shall satisfy the Section 1632 requirement for a written demonstration of judgment in dental diagnosis and treatment planning.

1634. Dental licensees

A person successfully passing the examination shall be registered as a licensed dentist on the board register, as provided in Section 1612, and shall be granted by the board a license to practice dentistry in the State of California.

1635.5. Licensing out-of-state dentists

(a) Notwithstanding Section 1634, the board may grant a license to practice dentistry to an applicant who has not taken an examination before the board, if the applicant submits all of the following to the board:

(1) A completed application form and all fees required by the board.

(2) Proof of a current license issued by another state to practice dentistry that is not revoked or suspended or otherwise restricted.

(3) Proof that the applicant has been in clinical practice, or has been a full-time faculty member in an accredited dental education program, for a minimum of 1,000 hours per year for at least five years preceding the date of his or her application under this section. The clinical practice requirement shall be deemed met if documentation of any of the following is submitted:

(A) The applicant may receive credit for two of the five years of clinical practice by demonstrating completion of a residency training program accredited by the American Dental Association Commission on Dental Accreditation, including, but not limited to, a general practice residency, an advanced education in general dentistry program, or a training program in a specialty recognized by the American Dental Association.

(B) If an applicant provides proof of at least two years of clinical practice or receives two years of credit as defined in subparagraph (A), he or she may commit to completing the remainder of the five-year requirement by filing with the board a copy of a pending contract to practice dentistry full time in a primary care clinic licensed under subdivision (a) of Section 1204 of the Health and Safety Code or in a primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code, or in a clinic owned or operated by a public hospital or health system, or a clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code. The board may periodically request verification of compliance with these requirements, and may revoke the license upon a finding that the employment requirement, or any other requirement of this subparagraph, has not been met.

(C) If an applicant provides proof of at least two years of clinical practice or receives two years of credit as defined in subparagraph (A), he or she may commit to completing the remainder of the five-year requirement by filing with the board a copy of a pending contract to teach or practice dentistry full time in an accredited dental education

program as approved by the Dental Board of California. The board may periodically request verification of compliance with these requirements, and may revoke the license upon a finding that the employment requirement, or any other requirement of this subparagraph, has not been met.

(4) Proof that the applicant has not been subject to disciplinary action by any state in which he or she is or has been previously licensed to practice dentistry. If the applicant has been subject to disciplinary action, the board shall review that action to determine if it warrants refusal to issue a license to the applicant.

(5) A signed release allowing the disclosure of information from the National Practitioner Data Bank and the verification of registration status with the federal Drug Enforcement Administration. The board shall review this information to determine if it warrants refusal to issue a license to the applicant.

(6) Proof that the applicant has not failed the examination for licensure to practice dentistry under this chapter within five years prior to the date of his or her application for a license under this section.

(7) Documentation of 50 units of continuing education completed within two years of the date of his or her application under this section. The continuing education shall include the mandatory coursework prescribed by the board pursuant to subdivision (b) of Section 1645.

(8) Any other information as specified by the board to the extent it is required of applicants for licensure by examination under this article.

(b) The board shall provide in the application packet to each out-of-state dentist pursuant to this section the following information:

(1) The location of dental manpower shortage areas that exist in the state.

(2) Those not-for-profit clinics and public hospitals seeking to contract with licensees for dental services.

(c) (1) The board shall review the impact of this section on the availability of dentists in California and report to the appropriate policy and fiscal committees of the Legislature by January 1, 2005. The report shall include a separate section providing data specific to those dentists who intend to fulfill the alternative clinical practice requirements of subparagraph (B) of paragraph (3) of subdivision (a). The report shall include, but not be limited to, all of the following:

(A) The total number of applicants from other states who have sought licensure.

(B) The number of dentists from other states licensed pursuant to this section, as well as the number of licenses not granted and the reasons why each license was not granted.

(C) The location of the practice of dentists licensed pursuant to this section.

(D) The number of dentists licensed pursuant to this section who establish a practice in a rural area or in an area designated as having a shortage of practicing dentists or no dentists at all.

(E) The length of time dentists licensed pursuant to this section maintained their practice in the reported location. This information shall be reported separately for dentists described in subparagraphs (C) and (D).

(2) In identifying a dentist's location of practice, the board shall use Medical Service Study Areas or other appropriate geographic descriptions for regions of the state.

(3) If appropriate, the board may report the information required by paragraph (1) separately for primary care dentists and specialists.

(d) This section shall become operative on July 1, 2002.

1636. Examination of foreign dental graduates

(a) Notwithstanding subdivision (b) of Section 1628, a person who has been issued a degree of doctor of dental medicine or doctor of dental surgery by a foreign dental school shall be eligible for examination as provided in this section upon complying with subdivisions (a) and (c) of Section 1628 and furnishing all of the following documentary evidence satisfactory to the board, that:

(1) He or she has completed in a dental school or schools a resident course of professional instruction in dentistry for the full number of academic years of undergraduate courses required for graduation.

(2) Subsequent thereto, he or she has been issued by the dental school, a dental diploma or a dental degree, as evidence of the completion of the course of dental instruction required for graduation.

(b) An applicant who is a graduate of a foreign dental school accredited by a body which has a reciprocal accreditation agreement with any commission or accreditation agency whose findings are accepted by the board shall be exempt from the qualifying examination provided for in paragraph (2) of subdivision (c).

(c) Examination by the board of a foreign-trained dental applicant shall be a progressive examination given in the following sequence:

(1) Examination in writing which shall be comprehensive and sufficiently thorough to test the knowledge, skill, and competence of the applicant to practice dentistry, and both questions and answers shall be written in the English language.

The written examination may be the National Board of Dental Examiners' examination or other examination, but in no event shall the examination given to foreign-trained applicants be a different examination than that given to applicants who have met the requirements of subdivision (b) of Section 1628. A foreign-trained applicant who passes the written examination shall be permanently exempt from retaking the examination.

Those applicants who have passed the California written examination are permanently exempt from retaking any written examination, except any examination required for continuing education purposes.

(2) Demonstration of the applicant's skill in restorative technique. An applicant who obtains an overall average grade of 75 percent in the restorative technique examination and a grade of 75 percent or more in two of the three subsections shall be deemed to have passed the examination. However, an applicant who obtains a grade of 85 percent in any subsection of the examination is exempt from retaking the subsection for two years following the date of the examination in which a grade of 85 percent was obtained. Every applicant who passes the entire restorative technique examination is permanently exempt from retaking the examination.

(d) An applicant who has successfully completed the written examination and the restorative technique examination shall be eligible to take and shall pass the examinations in diagnosis-treatment planning, prosthetic dentistry, diagnosis and treatment of periodontics, and operative dentistry in the identical manner in which the examinations are taken by and administered to other dental applicants. Exemptions in the examinations shall be applied to foreign-trained applicants in the same manner as they are applied to other dental applicants.

(e) This section shall remain in effect only until January 1, 2004, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2004, deletes or extends that date.

1636.4. Foreign dental schools

(a) The Legislature recognizes the need to ensure that graduates of foreign dental schools who have received an education that is equivalent to that of accredited institutions in the United States and that adequately prepares their students for the practice of dentistry shall be subject to the same licensure requirements as graduates of approved dental schools or colleges. It is the purpose of this section to provide for the evaluation

of foreign dental schools and the approval of those foreign dental schools that provide an education that is equivalent to that of similar accredited institutions in the United States and that adequately prepare their students for the practice of dentistry.

(b) The board shall be responsible for the approval of foreign dental schools based on standards established pursuant to subdivision (d). The board may contract with outside consultants or a national professional organization to survey and evaluate foreign dental schools. The consultant or organization shall report to the board regarding its findings in the survey and evaluation.

(c) The board shall establish a technical advisory group to review and comment upon the survey and evaluation of a foreign dental school contracted for pursuant to subdivision (b), prior to any final action by the board regarding certification of the foreign dental school. The technical advisory group shall be selected by the board and shall consist of four dentists, two of whom shall be selected from a list of five recognized United States dental educators recommended by the foreign school seeking approval. None of the members of the technical advisory group shall be affiliated with the school seeking certification.

(d) Any foreign dental school that wishes to be approved pursuant to this section shall make application to the board for this approval, which shall be based upon a finding that the educational program of the foreign dental school is equivalent to that of similar accredited institutions in the United States and adequately prepares its students for the practice of dentistry. Curriculum, faculty qualifications, student attendance, plant and facilities, and other relevant factors shall be reviewed and evaluated. The board, with the cooperation of the technical advisory group, shall identify by rule the standards and review procedures and methodology to be used in the approval process consistent with this subdivision. The board shall not grant approval if deficiencies found are of such magnitude as to prevent the students in the school from receiving an educational base suitable for the practice of dentistry.

(e) Periodic surveys and evaluations of all approved schools shall be made to ensure continued compliance with this section. Approval shall include provisional and full approval. The provisional form of approval shall be for a period determined by the board, not to exceed three years, and shall be granted to an institution, in accordance with rules established by the board, to provide reasonable time for the school seeking permanent approval to overcome deficiencies

found by the board. Prior to the expiration of a provisional approval and before the full approval is granted, the school shall be required to submit evidence that deficiencies noted at the time of initial application have been remedied. A school granted full approval shall provide evidence of continued compliance with this section. In the event that the board denies approval or reapproval, the board shall give the school a specific listing of the deficiencies that caused the denial and the requirements for remedying the deficiencies, and shall permit the school, upon request, to demonstrate by satisfactory evidence, within 90 days, that it has remedied the deficiencies listed by the board.

(f) A school shall pay a registration fee established by rule of the board, not to exceed one thousand dollars (\$1,000), at the time of application for approval and shall pay all reasonable costs and expenses the board incurs for the conduct of the approval survey.

(g) The board shall renew approval upon receipt of a renewal application, accompanied by a fee not to exceed five hundred dollars (\$500). Each fully approved institution shall submit a renewal application every seven years. Any approval that is not renewed shall automatically expire.

1636.5. Required remedial education

(a) Notwithstanding Section 135, on and after January 1, 1993, an applicant who fails to pass the examination required by paragraph (2) of subdivision (c) of Section 1636 after four attempts shall not be eligible for further reexamination until the applicant has successfully completed a minimum of two academic years of education at a dental school approved by either the Commission on Dental Accreditation or a comparable organization approved by the board. When the applicant applies for reexamination, he or she shall furnish proof satisfactory to the board that he or she has successfully completed the requirements of this subdivision.

(b) This section shall remain in effect only until January 1, 2004, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, 2004, deletes or extends that date.

1636.6. Legislative findings relating to need for training in restorative techniques for foreign dental graduates

The Legislature hereby finds and declares that in order to assure that the people of California receive the highest quality of dental care, dentists graduating from dental schools outside of the United States who apply for licensure in California

must possess the same training and skills as applicants from schools that have been approved by the board. The Legislature further finds and declares that the current process for ensuring the adequacy of training of these applicants is deficient, that high numbers of foreign dental graduates are failing the restorative technique examination required in Section 1636, and that there are numerous repeat failures. The Legislature further finds and declares that while current law requires that a foreign dental graduate who fails the restorative technique examination is required to take a minimum of two years of additional training from a dental school approved by the board, only three of the five dental schools operating in California offer a two-year course of study for graduates of foreign dental schools.

Therefore, the Legislature hereby urges all dental schools in this state to provide in their curriculum a two-year course of study that may be utilized by graduates of foreign dental schools to attain the prerequisites for licensure in California.

Article 2.4 Oral and Maxillofacial Surgery

1638. Definitions; Permit

(a) For purposes of this article, "oral and maxillofacial surgery" means the diagnosis and surgical and adjunctive treatment of diseases, injuries, and defects which involve both functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

(b) Any person licensed under the Medical Practice Act (Chapter 5 (commencing with Section 2000)) as a physician and surgeon who possesses, or possessed, a license to practice dentistry in another state, but is not licensed to practice dentistry under this chapter may apply to the board on a form prescribed by the board for an oral and maxillofacial surgery permit.

(c) The board may issue an oral and maxillofacial surgery permit to an applicant who has furnished evidence satisfactory to the board that he or she is currently certified or eligible for certification in oral and maxillofacial surgery by a specialty board recognized by the Commission on Accreditation of the American Dental Association and holds a current license in good standing to practice medicine in the state.

(d) An application shall be accompanied by an application fee of one hundred fifty dollars (\$150) and two classifiable sets of fingerprints on forms provided by the board.

1638.3. Renewal fee

(a) The fee to renew an oral and maxillofacial surgery permit shall be the same as that for renewal of a dental license as determined under Section 1724.

(b) Every provision of this chapter applicable to a person licensed to practice dentistry shall apply to a person to whom a special permit is issued under this article.

1638.5. Suspension of permit

An oral and maxillofacial surgery permit shall be automatically suspended for any period of time during which the holder does not possess a current valid license to practice medicine in this state.

1638.7. Occupational analysis; surgeons

The next occupational analysis of dental licensees and oral and maxillofacial facial surgeons pursuant to Section 139 shall include a survey of the training and practices of oral and maxillofacial surgeons and, upon completion of that analysis, a report shall be made to the Joint Legislative Sunset Review Committee regarding the findings.

Article 2.5 Special Permits

1640. Eligibility for examination

Any person meeting all the following eligibility requirements may apply for a special permit examination:

(a) Furnishing satisfactory evidence of having a pending contract with a California dental college approved by the board as a full-time professor, an associate professor, or an assistant professor.

(b) Furnishing satisfactory evidence of having graduated from a dental college approved by the board.

(c) Furnishing satisfactory evidence of having been certified as a diplomate of a specialty board or, in lieu thereof, establishing his or her qualifications to take a specialty board examination or furnishing satisfactory evidence of having completed an advanced educational program in a discipline from a dental college approved by the board.

(d) Paying the fee for applicants for examination provided by this chapter.

1640.1. Definitions

As used in this article, the following definitions shall apply:

(a) "Specialty" means an area of dental practice approved by the American Dental Association and recognized by the board.

(b) "Discipline" means an advanced dental educational program in an area of dental practice not approved as a specialty by the American Dental Association; but offered from a dental college approved by the board.

(c) "Dental college approved by the board" means a dental school or college that is approved by the Commission on Dental Accreditation of the American Dental Association, that is accredited by a body that has a reciprocal accreditation agreement with that commission, or that has been approved by the Board of Dental Examiners through its own approval process.

1640.2. Limitation on number of permits

The board shall limit the number of special permits to practice in a discipline at a college to the number that may be properly administered and supervised by the board.

1641. Scope of examination

The examination by the board for a special permit shall test the fitness of the applicant to practice a specialty or discipline recognized by the board.

1642. Conditions of permittee's practice

Every person to whom a special permit is issued shall be entitled to practice in the specialty or discipline in which he or she has been examined by the board at the dental college at which he or she is employed and its affiliated institutions as approved by the board on the following terms and conditions:

(a) The special permit holder shall file a copy of his or her employment contract with the board. The contract shall contain the following provision:

That the holder understands and acknowledges that when his or her full-time employment is terminated at the dental college, his or her special permit will be automatically revoked and that he or she will voluntarily surrender the permit to the board and will no longer be eligible to practice unless or until he or she has successfully passed the required licensure examination as provided in Article 2 (commencing with Section 1625).

(b) The holder shall be employed as a full-time professor, as associate professor, or an assistant professor at a California dental college approved by the board. "Full-time employment" as used in this section shall be considered a minimum of four days per week.

(c) The holder shall be subject to all the provisions of this chapter applicable to licensed dentists with the exception that the special permit shall be renewed annually.

Article 2.6 Continuing Education

1645. Condition to renewal of license

(a) Effective with the 1974 license renewal period, if the board determines that the public health and safety would be served by requiring all holders of licenses under this chapter to continue their education after receiving a license, it may require, as a condition to the renewal thereof, that they submit assurances satisfactory to the board that they will, during the succeeding two-year period, inform themselves of the developments in the practice of dentistry occurring since the original issuance of their licenses by pursuing one or more courses of study satisfactory to the board or by other means deemed equivalent by the board.

The board shall adopt regulations providing for the suspension of the licenses at the end of the two-year period until compliance with the assurances provided for in this section is accomplished.

(b) The board may also, as a condition of license renewal, require licentiates to successfully complete a portion of the required continuing education hours in specific areas adopted in regulations by the board. The board may prescribe this mandatory coursework within the general areas of patient care, health and safety, and law and ethics. The mandatory coursework prescribed by the board shall not exceed fifteen hours per renewal period for dentists, and seven and one-half hours per renewal period for dental auxiliaries. Any mandatory coursework required by the board shall be credited toward the continuing education requirements established by the board pursuant to subdivision (a).

1645.1. Required completion of radiation safety and coronal polishing courses

By January 1, 2005, each person who holds a registered dental assistant license shall provide evidence of having successfully completed board-approved courses in radiation safety and coronal polishing. The length and content of the courses shall be governed by applicable board regulations. Failure to comply with this section shall result in automatic suspension of the license which shall be reinstated upon the receipt of evidence that the licensee has successfully completed the required courses. Completion of the courses may be counted toward fulfillment of the continuing education requirements governed by Section 1645.

Article 2.7 Use of General Anesthesia

1646. "General anesthesia"

"General anesthesia," as used in this article, means a controlled state of depressed consciousness or unconsciousness, accompanied by partial or complete loss of protective reflexes, produced by a pharmacologic or nonpharmacologic method, or a combination thereof.

1646.1. Outpatient administration

(a) No dentist shall administer or order the administration of general anesthesia on an outpatient basis for dental patients unless the dentist either possesses a current license in good standing to practice dentistry in this state and holds a valid general anesthesia permit issued by the board or possesses a current permit under Section 1638 or 1640 and holds a valid general anesthesia permit issued by the board.

(b) No dentist shall order the administration of general anesthesia unless the dentist is physically within the dental office at the time of the administration.

(c) A general anesthesia permit shall expire on the date provided in Section 1715 which next occurs after its issuance, unless it is renewed as provided in this article.

(d) This article does not apply to the administration of local anesthesia or to conscious-patient sedation.

1646.2. Permit for anesthesia use

(a) A dentist who desires to administer or order the administration of general anesthesia shall apply to the board on an application form prescribed by the board. The dentist must submit an application fee and produce evidence showing that he or she has successfully completed a minimum of one year of advanced training in anesthesiology and related academic subjects approved by the board, or equivalent training or experience approved by the board, beyond the undergraduate school level.

(b) The application for a permit shall include documentation that equipment and drugs required by the board are on the premises.

1646.3. Maintenance of records

Any dentist holding a permit shall maintain medical history, physical evaluation, and general anesthesia records as required by board regulations.

1646.4. Onsite inspection

(a) Prior to the issuance or renewal of a permit for the use of general anesthesia, the board may, at its discretion, require an onsite inspection and evaluation of the licensee and the facility, equipment, personnel, and procedures utilized by the licensee. The permit of any dentist who has failed an onsite inspection and evaluation shall be automatically suspended 30 days after the date on which the board notifies the dentist of the failure, unless within that time period the dentist has retaken and passed an onsite inspection and evaluation. Every dentist issued a permit under this article shall have an onsite inspection and evaluation at least once every six years. Refusal to submit to an inspection shall result in automatic denial or revocation of the permit.

(b) The board may contract with public or private organizations or individuals expert in dental outpatient general anesthesia to perform onsite inspections and evaluations. The board may not, however, delegate its authority to issue permits or to determine the persons or facilities to be inspected.

1646.5. Completion of approved courses

A permittee shall be required to complete 15 hours of approved courses of study related to general anesthesia as a condition of renewal of a permit. Those courses of study shall be credited toward any continuing education required by the board pursuant to Section 1645.

1646.6. Fees

(a) The application fee for a permit or renewal under this article shall not exceed two hundred fifty dollars (\$250).

(b) The fee for an onsite inspection shall not exceed three hundred fifty dollars (\$350).

(c) It is the intent of the Legislature that fees established pursuant to this section be equivalent to administration and enforcement costs incurred by the board in carrying out this article.

(d) At the discretion of the board, the fee for onsite inspection may be collected and retained by a contractor engaged pursuant to subdivision (b) of Section 1646.4.

1646.7. Violation as unprofessional conduct

(a) A violation of this article constitutes unprofessional conduct and is grounds for the revocation or suspension of the dentist's permit, license, or both, or the dentist may be reprimanded or placed on probation.

(b) A violation of any provision of this article or Section 1682 is grounds for suspension or revocation of the physician's and surgeon's permit

issued pursuant to this article by the Dental Board of California. The exclusive enforcement authority against a physician and surgeon by the Dental Board of California shall be to suspend or revoke the permit issued pursuant to this article. The Dental Board of California shall refer a violation of this article by a physician and surgeon to the Medical Board of California for its consideration as unprofessional conduct and further action, if deemed necessary by the Medical Board of California, pursuant to Chapter 5 (commencing with Section 2000). A suspension or revocation of a physician and surgeon's permit by the Dental Board of California pursuant to this article shall not constitute a disciplinary proceeding or action for any purpose except to permit the initiation of an investigation or disciplinary action by the Medical Board of California as authorized by Section 2220.5.

(c) The proceedings under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the Dental Board of California shall have all the powers granted therein.

1646.8. Non-dental administration of anesthesia

Nothing in this chapter shall be construed to authorize a dentist to administer or directly supervise the administration of general anesthesia for reasons other than dental treatment, as defined in Section 1625.

1646.9. Physician and surgeon to administer anesthesia in dental office

(a) Notwithstanding any other provision of law, including, but not limited to, Section 1646.1, a physician and surgeon licensed pursuant to Chapter 5 (commencing with Section 2000) may administer general anesthesia in the office of a licensed dentist for dental patients, without regard to whether the dentist possesses a permit issued pursuant to this article, if all of the following conditions are met:

(1) The physician and surgeon possesses a current license in good standing to practice medicine in this state.

(2) The physician and surgeon holds a valid general anesthesia permit issued by the Dental Board of California pursuant to subdivision (b).

(b) (1) A physician and surgeon who desires to administer general anesthesia as set forth in subdivision (a) shall apply to the Dental Board of California on an application form prescribed by the board and shall submit all of the following:

(A) The payment of an application fee prescribed by this article.

(B) Evidence satisfactory to the Medical Board of California showing that the applicant has successfully completed a postgraduate residency training program in anesthesiology that is recognized by the American Council on Graduate Medical Education, as set forth in Section 2079.

(C) Documentation demonstrating that all equipment and drugs required by the Dental Board of California are possessed by the applicant and shall be available for use in any dental office in which he or she administers general anesthesia.

(D) Information relative to the current membership of the applicant on hospital medical staffs.

(2) Prior to issuance or renewal of a permit pursuant to this section, the Dental Board of California may, at its discretion, require an onsite inspection and evaluation of the facility, equipment, personnel, including, but not limited to, the physician and surgeon, and procedures utilized. At least one of the persons evaluating the procedures utilized by the physician and surgeon shall be a licensed physician and surgeon expert in outpatient general anesthesia who has been authorized or retained under contract by the Dental Board of California for this purpose.

(3) The permit of any physician and surgeon who has failed an onsite inspection and evaluation shall be automatically suspended 30 days after the date on which the board notifies the physician and surgeon of the failure unless within that time period the physician and surgeon has retaken and passed an onsite inspection and evaluation. Every physician and surgeon issued a permit under this article shall have an onsite inspection and evaluation at least once every six years. Refusal to submit to an inspection shall result in automatic denial or revocation of the permit.

(c) This section shall remain in effect until January 1, 2007, and as of that date is repealed, unless a later enacted statute, which is enacted on or before January 1, 2007, deletes or extends that date.

Article 2.8 Use of Conscious Sedation

1647. Legislative findings and declarations

(a) The Legislature finds and declares that a commendable patient safety record has been maintained in the past by dentists and those other qualified providers of anesthesia services who, pursuant to a dentist's authorization, administer patient sedation, and that the increasing number of pharmaceuticals and techniques used to

administer them for patient sedation require additional regulation to maintain patient safety in the future.

(b) The Legislature further finds and declares all of the following:

(1) That previous laws enacted in 1980 contained separate and distinct definitions for general anesthesia and the state of consciousness.

(2) That in dental practice, there is a continuum of sedation used which cannot be adequately defined in terms of consciousness and general anesthesia.

(3) That the administration of sedation through this continuum results in different states of consciousness that may or may not be predictable in every instance.

(4) That in most instances, the level of sedation will result in a predictable level of consciousness during the entire time of sedation.

(c) The Legislature further finds and declares that the educational standards presently required for general anesthesia should be required when the degree of sedation in the continuum of sedation is such that there is a reasonable possibility that loss of consciousness may result, even if unintended. These degrees of sedation have been referred to as "deep conscious sedation" and "light general anesthesia" in dental literature. However, achieving the degree of sedation commonly referred to as "light conscious sedation," where a margin of safety exists wide enough to render unintended loss of consciousness unlikely, requires educational standards appropriate to the administration of the resulting predictable level of consciousness.

1647.1. "Conscious sedation"

(a) As used in this article, "conscious sedation" means a minimally depressed level of consciousness produced by a pharmacologic or nonpharmacologic method, or a combination thereof, that retains the patient's ability to maintain independently and continuously an airway, and respond appropriately to physical stimulation and verbal command.

"Conscious sedation" does not include conditions resulting from the administration of oral medications or the administration of a mixture of nitrous oxide and oxygen, whether administered alone or in combination with each other.

(b) The drugs and techniques used in conscious sedation shall have a margin of safety wide enough to render unintended loss of consciousness unlikely.

(c) For the very young or handicapped individual, incapable of the usually expected verbal response,

a minimally depressed level of consciousness for that individual should be maintained.

1647.2. Administration on outpatients

(a) On and after January 1, 1992, no dentist shall administer or order the administration of, conscious sedation on an outpatient basis for dental patients unless one of the following conditions is met:

(1) The dentist possesses a current license in good standing to practice dentistry in California and either holds a valid general anesthesia permit or obtains a permit issued by the board authorizing the dentist to administer conscious sedation.

(2) The dentist possesses a current permit under Section 1638 or 1640 and either holds a valid anesthesia permit or obtains a permit issued by the board authorizing the dentist to administer conscious sedation.

(b) A conscious sedation permit shall expire on the date specified in Section 1715 which next occurs after its issuance, unless it is renewed as provided in this article.

(c) This article shall not apply to the administration of local anesthesia or to general anesthesia.

(d) A dentist who orders the administration of conscious sedation shall be physically present in the treatment facility while the patient is sedated.

1647.3. Permit application procedure and requirements

(a) A dentist who desires to administer or order the administration of conscious sedation, shall apply to the board on an application form prescribed by the board. The dentist shall submit an application fee and produce evidence showing that he or she has successfully completed a course of training in conscious sedation which meets the requirements of subdivision (c).

(b) The application for a permit shall include documentation that equipment and drugs required by the board are on the premises.

(c) A course in the administration of conscious sedation shall be acceptable if it meets all of the following as approved by the board:

(1) Consists of at least 60 hours of instruction.

(2) Requires satisfactory completion of at least 20 cases of administration of conscious sedation for a variety of dental procedures.

(3) Complies in all respects with the requirements of the 1985 Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry of the American Dental Association.

1647.4. Permit application procedure to continue administration; Temporary permit

(a) On or before June 30, 1991, each dentist who has been using conscious sedation prior to January 1, 1990, shall make a permit application to the board if the dentist desires to continue to administer conscious sedation. The permit application shall document 20 cases of conscious sedation performed by the applicant subsequent to January 1, 1989. A dentist applying pursuant to this section shall pass an onsite inspection and evaluation of the licensee and the facility, equipment, personnel, and procedures utilized by the licensee, prior to the issuance of a permit.

(b) If an applicant under this section documents successful completion of a course of study in conscious sedation which met the requirements of the 1982 Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry of the American Dental Association, the board may grant the applicant a temporary permit for one year.

(c) An applicant who holds a temporary permit shall pass an onsite inspection and evaluation prior to expiration of the temporary permit. Failure to pass the inspection and evaluation shall result in the immediate and automatic termination of the temporary permit.

In the event the board is unable to complete the required inspection and evaluation prior to December 31, 1992, the board may extend the temporary permit for no more than one additional year.

1647.5. Continuing education

A permittee shall be required to complete 15 hours of approved courses of study related to conscious sedation as a condition of renewal of a permit. Those courses of study shall be credited toward any continuing education required by the board pursuant to Section 1645.

1647.6. Physical evaluation and medical history

A physical evaluation and medical history shall be taken before the administration of conscious sedation. Any dentist holding a permit shall maintain records of the physical evaluation, medical history, and conscious sedation procedures used as required by board regulations.

1647.7. Onsite inspection and evaluation

(a) Prior to the issuance or renewal of a permit to administer conscious sedation, the board may, at its discretion, require an onsite inspection and evaluation of the licensee and the facility, equipment, personnel, and procedures utilized by

the licensee. The permit of any dentist who has failed an onsite inspection and evaluation shall be automatically suspended 30 days after the date on which the board notifies the dentist of the failure unless, within that time period, the dentist has retaken and passed an onsite inspection and evaluation. Every dentist issued a permit under this article shall have an onsite inspection and evaluation at least once in every six years. Refusal to submit to an inspection shall result in automatic denial or revocation of the permit.

(b) An applicant who has successfully completed the course required by Section 1647.3 may be granted a one-year temporary permit by the board prior to the onsite inspection and evaluation. Failure to pass the inspection and evaluation shall result in the immediate and automatic termination of the temporary permit.

(c) The board may contract with public or private organizations or individuals expert in dental outpatient conscious sedation to perform onsite inspections and evaluations. The board may not, however, delegate its authority to issue permits or to determine the persons or facilities to be inspected.

1647.8. Fees

(a) The application fee for a permit or renewal under this article shall not exceed two hundred fifty dollars (\$250).

(b) The fee for an onsite inspection shall not exceed three hundred fifty dollars (\$350).

(c) It is the intent of the Legislature that the board hire sufficient staff to administer the program and that the fees established pursuant to this section be equivalent to administration and enforcement costs incurred by the board in carrying out this article.

1647.9. Effect of violation

A violation of any provision of this article constitutes unprofessional conduct and is grounds for the revocation or suspension of the dentist's permit, license, or both, or the dentist may be reprimanded or placed on probation. The proceedings under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

Article 2.85 Use of Oral Conscious Sedation for Pediatric Patients

1647.10. Definitions

As used in this article:

(a) "Oral conscious sedation" means a minimally depressed level of consciousness produced by oral medication that retains the patient's ability to maintain independently and continuously an airway, and respond appropriately to physical stimulation and verbal command.

(b) "Minor patient" means a dental patient under the age of 13 years.

(c) "Certification" means the issuance of a certificate to a dentist licensed by the board who provides the board with his or her name, and the location where the administration of oral conscious sedation will occur, and fulfills the requirements specified in Sections 1647.12 and 1647.13.

1647.11. Oral conscious sedation of minor

(a) Notwithstanding subdivision (a) of Section 1647.2, after December 31, 2000, a dentist may not administer oral conscious sedation on an outpatient basis to a minor patient unless one of the following conditions is met:

(1) The dentist possesses a current license in good standing to practice dentistry in California and either holds a valid general anesthesia permit, conscious sedation permit, or has been certified by the board, pursuant to Section 1647.12, to administer oral sedation to minor patients.

(2) The dentist possesses a current permit issued under Section 1638 or 1640 and either holds a valid general anesthesia permit, or conscious sedation permit, or possesses a certificate as a provider of oral conscious sedation to minor patients in compliance with, and pursuant to, this article.

(b) Certification as a provider of oral conscious sedation to minor patients expires at the same time the license or permit of the dentist expires unless renewed at the same time the dentist's license or permit is renewed after its issuance, unless certification is renewed as provided in this article.

(c) This article shall not apply to the administration of local anesthesia or a mixture of nitrous oxide and oxygen or to the administration, dispensing, or prescription of postoperative medications.

1647.12. Oral conscious sedation by dentist

A dentist who desires to administer, or order the administration of, oral conscious sedation for minor patients, who does not hold a general anesthesia permit as provided in Sections 1646.1 and 1646.2 or a conscious sedation permit as provided in Sections 1647.2 and 1647.3, shall register his or her name with the board on a board-prescribed registration form. The dentist shall submit the registration fee and evidence showing that he or she satisfies any of the following requirements:

(a) Satisfactory completion of a postgraduate program in oral and maxillofacial surgery, pediatric dentistry, or periodontics at a dental school approved by either the Commission on Dental Accreditation or a comparable organization approved by the board.

(b) Satisfactory completion of a general practice residency or other advanced education in a general dentistry program approved by the board.

(c) Satisfactory completion of a board-approved educational program on oral medications and sedation.

1647.13. Required courses of study

A certificate holder shall be required to complete a minimum of 7 hours of approved courses of study related to oral conscious sedation of minor patients as a condition of certification renewal as an oral conscious sedation provider. Those courses of study shall be accredited toward any continuing education required by the board pursuant to Section 1645.

1647.14. Precautions

(a) A physical evaluation and medical history shall be taken before the administration of, oral conscious sedation to a minor. Any dentist who administers, or orders the administration of, oral conscious sedation to a minor shall maintain records of the physical evaluation, medical history, and oral conscious sedation procedures used as required by the board regulations.

(b) A dentist who administers, or who orders the administration of, oral sedation for a minor patient shall be physically present in the treatment facility while the patient is sedated and shall be present until discharge of the patient from the facility.

(c) The drugs and techniques used in oral conscious sedation to minors shall have a margin of safety wide enough to render unintended loss of consciousness unlikely.

1647.15. Certification fee

The fee for an application for initial certification or renewal under this article shall not exceed the amount necessary to cover administration and enforcement costs incurred by the board in carrying out this article. The listed fee may be prorated based upon the date of the renewal of the dentist's license or permit.

1647.16. Office standards

Any office in which oral conscious sedation of minor patients is conducted pursuant to this article shall, unless otherwise provided by law, meet the facilities and equipment standards set forth by the board in regulation.

1647.17. Violations

A violation of any provision of this article constitutes unprofessional conduct and is grounds for the revocation or suspension of the dentist's permit, certificate, license, or all three, or the dentist may be reprimanded or placed on probation. The proceedings under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part I of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

Article 2.9 Dental Restorative Materials

1648.10. Fact sheet

(a) The Board of Dental Examiners of California shall develop and distribute a fact sheet describing and comparing the risks and efficacy of the various types of dental restorative materials that may be used to repair a dental patient's oral condition or defect. The fact sheet shall include:

(1) A description of the groups of materials that are available to the profession for restoration of an oral condition or defect.

(2) A comparison of the relative benefits and detriments of each group of materials.

(3) A comparison of the cost considerations associated with each group of materials.

(4) A reference to encourage discussion between patient and dentist regarding materials and to inform the patient of his or her options.

(b) The fact sheet shall be made available by the Board of Dental Examiners of California to all licensed dentists.

(c) The Board of Dental Examiners of California shall update the fact sheet described in subdivision (a) as determined necessary by the board.

1648.15. Fact sheet to be given to all patients

The fact sheet set forth by Section 1648.10 shall be provided by a dentist to every new patient and to patients of record prior to the performance of dental restoration work. The dentist needs to provide the fact sheet to each patient only once pursuant to the previous requirements of this section. An acknowledgment of the receipt of the fact sheet by the patient shall be signed by the patient and a copy of it shall be placed in the patient's dental record. If updates to the fact sheet are made by the board, the updated fact sheet shall be given to patients in the manner provided above. A dentist shall also provide the fact sheet to the patient upon request.

1648.20. Materials to which article applies

(a) This article shall not apply to any surgical, endodontic, periodontic, or orthodontic dental procedure in which dental restorative materials are not used.

(b) For purposes of this article, "dental restorative materials" means any structure or device placed into a patient's mouth with the intent that it remain there for an indefinite period beyond the completion of the dental procedure, including material used for filling cavities in, or rebuilding or repairing the organic structure of, a tooth or teeth, but excluding synthesized structures or devices intended to wholly replace an extracted tooth or teeth, such as implants.

Article 3 Registration**1650. Required information**

Every person who is now or hereafter licensed to practice dentistry in this state shall register on forms prescribed by the board, his or her place of practice with the Executive Officer of the State Board of Dental Examiners, or, if he or she has more than one place of practice, all of the places of practice, or, if he or she has no place of practice, to so notify the executive officer of the board. A person licensed by the board shall register with the executive officer within 30 days after the date of his or her license.

1651. Address changes

Any dentist who removes his place of practice shall register each change made by him within one month after making said change. In the event any licensed dentist fails to notify the board of any change in the address of his place of practice within the time prescribed by this section, the board shall not renew such person's license until the penalty fixed by this chapter is paid. An applicant for renewal of a license to practice dentistry shall specify in his application whether he has changed the address of his place of practice, and if so, the date of such change, and the board may accept such statement as evidence of such fact.

1653. Registration certificates

The secretary shall issue a certificate of registration for each licentiate hereunder and for each office registered by such licentiate. The license and certificate may be offered as primary evidence in all courts of the facts therein stated.

1654. Name changes

Any licensed person who shall change his or her name according to law shall, within 10 days after that change, reregister with the executive officer of the board and the executive officer shall make a marginal note of the former name of the licentiate.

1655. Failure to register

Any failure on the part of any person holding such license to register it as directed for a period of six months after its issuance shall ipso facto work a forfeiture of his license, and it shall not be restored except upon the written application and payment to the board of the fee provided for restoration of license.

1656. Radiation safety requirements

On and after January 1, 1985, every dentist licensed to practice dentistry in the state and any person working in a dentist's office who operates dental radiographic equipment shall meet at least one of the following requirements:

(a) Pass a course, approved by the board, in radiation safety which includes theory and clinical application in radiographic technique. The board shall require the courses to be taught by persons qualified in radiographic technique and shall adopt regulations specifying the qualifications for course instructors.

(b) Have passed a radiation safety examination conducted by the board prior to January 1, 1985.

1657. Mobile dental clinics

A licensed dentist may operate one mobile dental clinic or unit registered as a dental office or facility. The mobile dental clinic or unit shall be registered and operated in accordance with regulations established by the board, provided such regulations are not designed to prevent or lessen competition in service areas. A mobile dental clinic or unit registered and operated in accordance with the rules, and which has paid the fees, which may be established by the board, shall otherwise be exempted from the provisions of this article and Article 3.5 (commencing with Section 1658).

Article 3.5 Additional Offices**1658. Registration; Disclosure to patients**

When any licentiate hereunder desires to have more than one place of practice, he shall, prior to the opening of any additional office, make application therefor to the board, pay the fee required by this chapter, and receive permission in writing from the board to have such additional

place of practice. "Place of practice" means any dental office where any act of dentistry is practiced as defined by Section 1625, and shall include any such place of practice in which the applicant holds any proprietary interest of any nature whatsoever, or in which he holds any right to participate in the management or control thereof. A dentist who is the lessor of a dental office shall not be deemed to hold a proprietary interest in that place of practice, unless he is entitled to participate in the management or control of the dentistry practiced there. This section shall not apply to a licentiate who practices dentistry outside his registered place of practice in any of the following places:

(a) Facilities licensed by the State Department of Health Services.

(b) Licensed health facilities as defined in Section 1250 of the Health and Safety Code.

(c) Licensed clinics as defined in Section 1204 of the Health and Safety Code.

(d) Licensed community care facilities as defined in Section 1502 of the Health and Safety Code.

(e) Schools of any grade level, whether public or private.

(f) Public institutions including, but not limited to, federal, state, and local penal and correctional facilities.

(g) Mobile units which are operated by a public or governmental agency or a nonprofit or charitable organization and are approved by the board, provided that the mobile units meet all statutory or regulatory requirements.

(h) The home of a nonambulatory patient when a physician or registered nurse has provided a written note that the patient is unable to visit a dental office.

1658.1. More than one dental office

Nothing in this chapter shall be construed to prohibit a licensed dentist from maintaining more than one dental office in this state if all of the following conditions are met:

(a) In addition to any existing legal responsibility or liability, a dentist maintaining more than one office shall assume legal responsibility and liability for the dental services rendered in each of the offices maintained by the dentist.

(b) A dentist maintaining more than one office shall ensure that each office is in compliance with the supervision requirements of this chapter.

(c) A dentist maintaining more than one office shall post, in an area which is likely to be seen by all patients who use the facility, a sign with the dentist's name, mailing address, telephone number, and dental license number.

1658.2. "An additional place of practice"

"An additional place of practice," as used in this article, means any place of practice which increases the number of places of practice of the applicant and shall include any such additional office which the applicant proposes to originally establish, either individually or in association with another, as well as any established place of practice which the applicant acquires or proposes to acquire, in whole or in part, by purchase, repossession, reassignment, gift, devise, bequest, or operation of law, except as otherwise provided in this article.

1658.3. Applicability of article

Nothing in this article shall limit or authorize the board to limit the number of additional places of practice authorized by the board, which are in operation on October 1, 1961, and which conform to the provisions of this article, nor prevent or limit a licensee from acquiring from his parent, by sale, transfer, assignment, gift, succession, bequest, or operation of law, whether heretofore or hereafter made, prior to January 1, 1968 or the effective date of the amendments to this section enacted by the Legislature at the 1967 Regular Session, whichever date occurs later, and from operating any additional office or offices of his parent so acquired.

1658.4. Transfers between licentiates

The transfer after October 1, 1961, of any additional office from one licentiate to another, other than as authorized by this article, shall terminate the privilege of operating such additional office. 1658.5. The transfer of the location of one additional office to a new location within the same county shall not be considered the establishment of a new additional office. 1658.6. Failure to comply with the provisions of this article relating to the operation of additional offices shall be a ground for the suspension or revocation of the permission granted by the board to operate such additional office.

1658.7. Enforcement

The board shall have the power to carry out the provisions of this article by uniform rules and regulations.

Article 4 Suspension and Revocation of Licenses

1670. Grounds for action; Proceedings

Any licentiate may have his license revoked or suspended or be reprimanded or be placed on probation by the board for unprofessional conduct, or incompetence, or gross negligence, or repeated acts of negligence in his or her profession, or for the issuance of a license by mistake, or for any other cause applicable to the licentiate provided in this chapter. The proceedings under this article shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

1670.1. Conviction of related crime

Any licentiate under this chapter may have his or her license revoked or suspended or be reprimanded or be placed on probation by the board for conviction of a crime substantially related to the qualifications, functions, or duties of a dentist or dental auxiliary, in which case the record of conviction or a certified copy thereof, certified by the clerk of the court or by the judge in whose court the conviction is had, shall be conclusive evidence.

The board shall undertake proceedings under this section upon the receipt of a certified copy of the record of conviction. A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge of a felony or of any misdemeanor substantially related to the qualifications, functions, or duties of a dentist or dental auxiliary is deemed to be a conviction within the meaning of this section. The board may order the license suspended or revoked, or may decline to issue a license, when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under any provision of the Penal Code, including, but not limited to, Section 1203.4 of the Penal Code, allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

1671. Conditions of probation

The board may discipline a licentiate by placing him or her on probation under various terms and conditions, which may include, but are not limited to, the following:

(a) Requiring the licentiate to obtain additional training or pass an examination upon completion of

training, or both. The examination may be written, oral, or both, and may be a practical or clinical examination or both, at the option of the board.

(b) Requiring the licentiate to submit to a complete diagnostic examination by one or more physicians appointed by the board, if warranted by the physical or mental condition of the licentiate. If the board requires the licentiate to submit to such an examination, the board shall receive and consider any other report of a complete diagnostic examination given by one or more physicians of the licentiate's choice.

(c) Restricting or limiting the extent, scope or type of practice of the licentiate.

(d) Requiring restitution of fees to the licentiate's patients or payers of services unless such restitution has already been made.

(e) Providing the option of alternative community service in lieu of all or part of a period of suspension in cases other than violations relating to quality of care.

1678. Record of revocations

Upon the revocation of any license, the fact shall be noted upon the records of the board and the license shall be marked as canceled upon the date of its revocation.

1680. Unprofessional conduct defined

Unprofessional conduct by a person licensed under this chapter is defined as, but is not limited to, the violation of any one of the following:

(a) The obtaining of any fee by fraud or misrepresentation.

(b) The employment directly or indirectly of any student or suspended or unlicensed dentist to practice dentistry as defined in this chapter.

(c) The aiding or abetting of any unlicensed person to practice dentistry.

(d) The aiding or abetting of a licensed person to practice dentistry unlawfully.

(e) The committing of any act or acts of gross immorality substantially related to the practice of dentistry.

(f) The use of any false, assumed, or fictitious name, either as an individual, firm, corporation, or otherwise, or any name other than the name under which he or she is licensed to practice, in advertising or in any other manner indicating that he or she is practicing or will practice dentistry, except that name as is specified in a valid permit issued pursuant to Section 1701.5.

(g) The practice of accepting or receiving any commission or the rebating in any form or manner of fees for professional services, radiograms, prescriptions, or other services or articles supplied to patients.

(h) The making use by the licentiate or any agent of the licentiate of any advertising statements of a character tending to deceive or mislead the public.

(i) The advertising of either professional superiority or the advertising of performance of professional services in a superior manner. This subdivision shall not prohibit advertising permitted by subdivision (h) of Section 651.

(j) The employing or the making use of solicitors.

(k) The advertising in violation of Section 651.

(l) The advertising to guarantee any dental service, or to perform any dental operation painlessly. This subdivision shall not prohibit advertising permitted by Section 651.

(m) The violation of any of the provisions of law regulating the procurement, dispensing, or administration of dangerous drugs, as defined in Article 7 (commencing with Section 4211) of Chapter 9, or controlled substances, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code.

(n) The violation of any of the provisions of this division.

(o) The permitting of any person to operate dental radiographic equipment who has not met the requirements of Section 1656.

(p) The clearly excessive prescribing or administering of drugs or treatment, or the clearly excessive use of diagnostic procedures, or the clearly excessive use of diagnostic or treatment facilities, as determined by the customary practice and standards of the dental profession. Any person who violates this subdivision is guilty of a misdemeanor and shall be punished by a fine of not less than one hundred dollars (\$100) or more than six hundred dollars (\$600), or by imprisonment for a term of not less than 60 days or more than 180 days, or by both a fine and imprisonment.

(q) The use of threats or harassment against any patient or licentiate for providing evidence in any possible or actual disciplinary action, or other legal action; or the discharge of an employee primarily based on the employee's attempt to comply with the provisions of this chapter or to aid in the compliance.

(r) Suspension or revocation of a license issued, or discipline imposed, by another state or territory on grounds which would be the basis of discipline in this state.

(s) The alteration of a patient's record with intent to deceive.

(t) Unsanitary or unsafe office conditions, as determined by the customary practice and standards of the dental profession.

(u) The abandonment of the patient by the licentiate, without written notice to the patient that

treatment is to be discontinued and before the patient has ample opportunity to secure the services of another dentist and provided the health of the patient is not jeopardized.

(v) The willful misrepresentation of facts relating to a disciplinary action to the patients of a disciplined licentiate.

(w) Use of fraud in the procurement of any license issued pursuant to this chapter.

(x) Any action or conduct which would have warranted the denial of the license.

(y) The aiding or abetting of a licensed dentist or dental auxiliary to practice dentistry in a negligent or incompetent manner.

(z) The failure to report to the board in writing within seven days any of the following:

(1) the death of his or her patient during the performance of any dental procedure;

(2) the discovery of the death of a patient whose death is related to a dental procedure performed by him or her; or

(3) except for a scheduled hospitalization, the removal to a hospital or emergency center for medical treatment for a period exceeding 24 hours of any patient to whom oral conscious sedation, conscious sedation, or general anesthesia was administered, or any patient as a result of dental treatment. With the exception of patients to whom oral conscious sedation, conscious sedation, or general anesthesia was administered, removal to a hospital or emergency center that is the normal or expected treatment for the underlying dental condition is not required to be reported. Upon receipt of a report pursuant to this subdivision the board may conduct an inspection of the dental office if the board finds that it is necessary.

(aa) Participating in or operating any group advertising and referral services that are in violation of Section 650.2.

(bb) The failure to use a fail-safe machine with an appropriate exhaust system in the administration of nitrous oxide. The board shall, by regulation, define what constitutes a fail-safe machine.

(cc) Engaging in the practice of dentistry with an expired license.

(dd) Except for good cause, the knowing failure to protect patients by failing to follow infection control guidelines of the board, thereby risking transmission of blood-borne infectious diseases from dentist or dental auxiliary to patient, from patient to patient, and from patient to dentist or dental auxiliary. In administering this subdivision, the board shall consider referencing the standards, regulations, and guidelines of the State Department of Health Services developed pursuant to Section 1250.11 of the Health and Safety Code

and the standards, guidelines, and regulations pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300), Division 5, Labor Code) for preventing the transmission of HIV, hepatitis B, and other blood-borne pathogens in health care settings. As necessary, the board shall consult with the Medical Board of California, the Board of Podiatric Medicine, the Board of Registered Nursing, and the Board of Vocational Nursing and Psychiatric Technicians, to encourage appropriate consistency in the implementation of this subdivision.

The board shall seek to ensure that licentiates and others regulated by the board are informed of the responsibility of licentiates and others to follow infection control guidelines, and of the most recent scientifically recognized safeguards for minimizing the risk of transmission of blood-borne infectious diseases.

(ee) The utilization by a licensed dentist of any person to perform the functions of a registered dental assistant, registered dental assistant in extended functions, registered dental hygienist, or registered dental hygienist in extended functions who, at the time of initial employment, does not possess a current, valid license to perform those functions.

1681. Additional acts of unprofessional conduct

In addition to other acts constituting unprofessional conduct within the meaning of this chapter, it is unprofessional conduct for a person licensed under this chapter to do any of the following:

(a) Obtain or possess in violation of law, or except as directed by a licensed physician and surgeon, dentist, or podiatrist, administer to himself, any controlled substance, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug as defined in Article 8 (commencing with Section 4211) of Chapter 9.

(b) Use any controlled substance, as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug as defined in Article 8 (commencing with Section 4211) of Chapter 9, or alcoholic beverages or other intoxicating substances, to an extent or in a manner dangerous or injurious to himself, to any person, or the public to the extent that such use impairs his ability to conduct with safety to the public the practice authorized by his license.

(c) The conviction of a charge of violating any federal statute or rules, or any statute or rule of this state, regulating controlled substances, as defined

in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug, as defined in Article 8 (commencing with Section 4211) of Chapter 9, or the conviction of more than one misdemeanor, or any felony, involving the use or consumption of alcohol or drugs, if the conviction is substantially related to the practice authorized by his license. The record of conviction or certified copy thereof, certified by the clerk of the court or by the judge in whose court the conviction is had, shall be conclusive evidence of a violation of this section; a plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section; the board may order the license suspended or revoked, or may decline to issue a license, when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under any provision of the Penal Code, including, but not limited to, Section 1203.4 of the Penal Code, allowing such person to withdraw his plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

1682. Acts constituting unprofessional conduct involving sedation or anesthesia

In addition to other acts constituting unprofessional conduct under this chapter, it is unprofessional conduct for:

(a) Any dentist performing dental procedures to have more than one patient undergoing conscious sedation or general anesthesia on an outpatient basis at any given time unless each patient is being continuously monitored on a one-to-one ratio while sedated by either the dentist or another licensed health professional authorized by law to administer conscious sedation or general anesthesia.

(b) Any dentist with patients recovering from conscious sedation or general anesthesia to fail to have the patients closely monitored by licensed health professionals experienced in the care and resuscitation of patients recovering from conscious sedation or general anesthesia. If one licensed professional is responsible for the recovery care of more than one patient at a time, all of the patients shall be physically in the same room to allow continuous visual contact with all patients and the patient to recovery staff ratio should not exceed three to one.

(c) Any dentist with patients who are undergoing conscious sedation to fail to have these patients continuously monitored during the dental

procedure with a pulse oximeter or similar or superior monitoring equipment required by the board.

(d) Any dentist with patients who are undergoing conscious sedation to have dental office personnel directly involved with the care of those patients who are not certified in basic cardiac life support (CPR) and recertified biennially.

(e) Any dentist to fail to obtain the written informed consent of a patient prior to administering general anesthesia or conscious sedation. In the case of a minor, the consent shall be obtained from the child's parent or guardian.

1683. Identification of licensed health professionals in dental offices

(a) Every dentist, dental health professional, or other licensed health professional who performs a service on a patient in a dental office shall identify himself or herself in the patient record by signing his or her name, or an identification number and initials, next to the service performed and shall date those treatment entries in the record. Any person licensed under this chapter who owns, operates, or manages a dental office shall ensure compliance with this requirement.

(b) Repeated violations of this section constitutes unprofessional conduct.

1684. Use of instrument or device not in accordance with customary standards

In addition to other acts constituting unprofessional conduct under this chapter, it is unprofessional conduct for a person licensed under this chapter to perform, or hold himself or herself out as able to perform, professional services beyond the scope of his or her license and field or fields of competence as established by his or her education, experience, training, or any combination thereof. This includes, but is not limited to, the use of any instrument or device in a manner that is not in accordance with the customary standards and practices of the dental profession. This section shall not apply to research conducted by accredited dental schools or colleges, or to research conducted pursuant to an investigational device exemption issued by the United States Food and Drug Administration.

1684.1. Failure to comply with request or court order for dental records; civil penalties

(a) (1) A licensee who fails or refuses to comply with a request for the dental records of a patient, that is accompanied by that patient's written authorization for release of record to the board, within 15 days of receiving the request and authorization, shall pay to the board a civil penalty

of two hundred fifty dollars (\$250) per day for each day that the documents have not been produced after the 15th day, up to a maximum of five thousand dollars (\$5,000) unless the licensee is unable to provide the documents within this time period for good cause.

(2) A health care facility shall comply with a request for the dental records of a patient that is accompanied by that patient's written authorization for release of records to the board together with a notice citing this section and describing the penalties for failure to comply with this section. Failure to provide the authorizing patient's dental records to the board within 30 days of receiving this request, authorization, and notice shall subject the health care facility to a civil penalty, payable to the board, of up to two hundred fifty dollars (\$250) per day for each day that the documents have not been produced after the 30th day, up to a maximum of five thousand dollars (\$5,000), unless the health care facility is unable to provide the documents within this time period for good cause. This paragraph shall not require health care facilities to assist the board in obtaining the patient's authorization. The board shall pay the reasonable cost of copying the dental records.

(b) (1) A licensee who fails or refuses to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board shall pay to the board a civil penalty of one thousand dollars (\$1,000) per day for each day that the documents have not been produced after the date by which the court order requires the documents to be produced, unless it is determined that the order is unlawful or invalid. Any statute of limitations applicable to the filing of an accusation by the board shall be tolled during the period the licensee is out of compliance with the court order and during any related appeals.

(2) Any licensee who fails or refuses to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board is guilty of a misdemeanor punishable by a fine payable to the board not to exceed five thousand dollars (\$5,000). The fine shall be added to the licensee's renewal fee if it is not paid by the next succeeding renewal date. Any statute of limitations applicable to the filing of an accusation by the board shall be tolled during the period the licensee is out of compliance with the court order and during any related appeals.

(3) A health care facility that fails or refuses to comply with a court order, issued in the enforcement of a subpoena, mandating the release of patient records to the board, that is accompanied by a notice citing this section and describing the penalties for failure to comply with

this section, shall pay to the board a civil penalty of up to one thousand dollars (\$1,000) per day for each day that the documents have not been produced, up to ten thousand dollars (\$10,000), after the date by which the court order requires the documents to be produced, unless it is determined that the order is unlawful or invalid. Any statute of limitations applicable to the filing of an accusation by the board against a licensee shall be tolled during the period the health care facility is out of compliance with the court order and during any related appeals.

(4) Any health care facility that fails or refuses to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board is guilty of a misdemeanor punishable by a fine payable to the board not to exceed five thousand dollars (\$5,000). Any statute of limitations applicable to the filing of an accusation by the board against a licensee shall be tolled during the period the health care facility is out of compliance with the court order and during any related appeals.

(c) Multiple acts by a licensee in violation of subdivision (b) shall be punishable by a fine not to exceed five thousand dollars (\$5,000) or by imprisonment in a county jail not exceeding six months, or by both that fine and imprisonment. Multiple acts by a health care facility in violation of subdivision (b) shall be punishable by a fine not to exceed five thousand dollars (\$5,000) and shall be reported to the State Department of Health Services and shall be considered as grounds for disciplinary action with respect to licensure, including suspension or revocation of the license or certificate. (d) A failure or refusal to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board constitutes unprofessional conduct and is grounds for suspension or revocation of his or her license.

(e) Imposition of the civil penalties authorized by this section shall be in accordance with the Administrative Procedure Act (Chapter 5 (commencing with Section 11500) of Division 3 of Title 2 of the Government Code). (f) For the purposes of this section, a "health care facility" means a clinic or health care facility licensed or exempt from licensure pursuant to Division 2 (commencing with Section 1200) of the Health and Safety Code.

1684.5. Treatment of patient not patient of record as unprofessional conduct

(a) In addition to other acts constituting unprofessional conduct under this chapter, it is unprofessional conduct for any dentist to perform

or allow to be performed any treatment on a patient who is not a patient of record of that dentist. A dentist may, however, after conducting a preliminary oral examination, require or permit any dental auxiliary to perform procedures necessary for diagnostic purposes, provided that the procedures are permitted under the auxiliary's authorized scope of practice. Additionally, a dentist may require or permit a dental auxiliary to perform all of the following duties prior to any examination of the patient by the dentist, provided that the duties are authorized for the particular classification of dental auxiliary pursuant to Article 7 (commencing with Section 1740):

(1) Expose emergency radiographs upon direction of the dentist.

(2) Perform extra-oral duties or functions specified by the dentist.

(3) Perform mouth-mirror inspections of the oral cavity, to include charting of obvious lesions, malocclusions, existing restorations, and missing teeth.

(b) For purposes of this section, "patient of record" refers to a patient who has been examined, has had a medical and dental history completed and evaluated, and has had oral conditions diagnosed and a written plan developed by the licensed dentist.

(c) This section shall not apply to dentists providing examinations on a temporary basis outside of a dental office in settings including, but not limited to, health fairs and school screenings.

(d) This section shall not apply to fluoride mouth rinse or supplement programs administered in a school or preschool setting.

1685. Requiring/permitting care discouraging necessary treatment or permitting specific types of treatment or negligence

In addition to other acts constituting unprofessional conduct under this chapter, it is unprofessional conduct for a person licensed under this chapter to require, either directly or through an office policy, or knowingly permit the delivery of dental care that discourages necessary treatment or permits clearly excessive treatment, incompetent treatment, grossly negligent treatment, repeated negligent acts, or unnecessary treatment, as determined by the standard of practice in the community.

1686. Reinstatement/penalty modification

A person whose license, certificate, or permit has been revoked or suspended, who has been placed on probation, or whose license, certificate, or permit was surrendered pursuant to a stipulated settlement as a condition to avoid a disciplinary

administrative hearing, may petition the board for reinstatement or modification of penalty, including modification or termination of probation, after a period of not less than the following minimum periods have elapsed from the effective date of the decision ordering disciplinary action:

(a) At least three years for reinstatement of a license revoked for unprofessional conduct or surrendered pursuant to a stipulated settlement as a condition to avoid an administrative disciplinary hearing.

(b) At least two years for early termination, or modification of a condition, of a probation of three years or more.

(c) At least one year for modification of a condition, or reinstatement of a license revoked for mental or physical illness, or termination, or modification of a condition, of a probation of less than three years.

The petition shall state any fact required by the board.

The petition may be heard by the board, or the board may assign the petition to an administrative law judge designated in Section 11371 of the Government Code.

In considering reinstatement or modification or penalty, the board or the administrative law judge hearing the petition may consider (1) all activities of the petitioner since the disciplinary action was taken, (2) the offense for which the petitioner was disciplined, (3) the petitioner's activities during the time the license, certificate, or permit was in good standing, and (4) the petitioner's rehabilitative efforts, general reputation for truth, and professional ability. The hearing may be continued from time to time as the board or the administrative law judge as designated in Section 11371 of the Government Code finds necessary.

The board or the administrative law judge may impose necessary terms and conditions on the licentiate in reinstating a license, certificate, or permit or modifying a penalty.

No petition under this section shall be considered while the petitioner is under sentence for any criminal offense, including any period during which the petitioner is on court-imposed probation or parole. No petition shall be considered while there is an accusation or petition to revoke probation pending against the person. The board may deny without a hearing or argument any petition filed pursuant to this section within a period of two years from the effective date of the prior decision following a hearing under this section. Nothing in this section shall be deemed to alter Sections 822 and 823.

Article 4.7 Diversion Program

1695. Intent

It is the intent of the Legislature that the Board of Dental Examiners of California seek ways and means to identify and rehabilitate licentiates whose competency may be impaired due to abuse of dangerous drugs or alcohol, so that licentiates so afflicted may be treated and returned to the practice of dentistry in a manner which will not endanger the public health and safety. It is also the intent of the Legislature that the Board of Dental Examiners of California shall implement this legislation in part by establishing a diversion program as a voluntary alternative approach to traditional disciplinary actions.

1695.1. Definitions

As used in this article:

(a) "Board" means the Board of Dental Examiners of California.

(b) "Committee" means a diversion evaluation committee created by this article.

1695.2. Evaluation committees

One or more diversion evaluation committees is hereby created in the state to be established by the board. The board shall establish criteria for the selection of the committee. No board member shall serve on any committee.

1695.3. Committee members' expenses

Each member of a committee shall receive per diem and expenses as provided in Section 103.

1695.4. Administration

The board shall administer the provisions of this article.

1695.5. Acceptance, denial, or termination

(a) The board shall establish criteria for the acceptance, denial, or termination of licentiates in a diversion program. Unless ordered by the board as a condition of licentiate disciplinary probation, only those licentiates who have voluntarily requested diversion treatment and supervision by a committee shall participate in a diversion program.

(b) A licentiate who is not the subject of a current investigation may self-refer to the diversion program on a confidential basis, except as provided in subdivision (f).

(c) A licentiate under current investigation by the board may also request entry into the diversion program by contacting the board's Diversion Program Manager. The Diversion Program Manager may refer the licentiate requesting participation in the program to a diversion

evaluation committee for evaluation of eligibility. Prior to authorizing a licentiate to enter into the diversion program, the Diversion Program Manager may require the licentiate, while under current investigation for any violations of the Dental Practice Act or other violations, to execute a statement of understanding that states that the licentiate understands that his or her violations of the Dental Practice Act or other statutes that would otherwise be the basis for discipline, may still be investigated and the subject of disciplinary action.

(d) If the reasons for a current investigation of a licentiate are based primarily on the self-administration of any controlled substance or dangerous drugs or alcohol under Section 1681 of the Business and Professions Code, or the illegal possession, prescription, or nonviolent procurement of any controlled substance or dangerous drugs for self-administration that does not involve actual, direct harm to the public, the board shall close the investigation without further action if the licentiate is accepted into the board's diversion program and successfully completes the requirements of the program. If the licentiate withdraws or is terminated from the program by a diversion evaluation committee, the investigation shall be reopened and disciplinary action imposed, if warranted, as determined by the board.

(e) Neither acceptance nor participation in the diversion program shall preclude the board from investigating or continuing to investigate, or taking disciplinary action or continuing to take disciplinary action against, any licentiate for any unprofessional conduct committed before, during, or after participation in the diversion program.

(f) All licentiates shall sign an agreement of understanding that the withdrawal or termination from the diversion program at a time when a diversion evaluation committee determines the licentiate presents a threat to the public's health and safety shall result in the utilization by the board of diversion treatment records in disciplinary or criminal proceedings.

(g) Any licentiate terminated from the diversion program for failure to comply with program requirements is subject to disciplinary action by the board for acts committed before, during, and after participation in the diversion program. A licentiate who has been under investigation by the board and has been terminated from the diversion program by a diversion evaluation committee shall be reported by the diversion evaluation committee to the board.

1695.6. Evaluation committee's duties

Each committee shall have the following duties and responsibilities:

(a) To evaluate those licentiates who request to participate in the diversion program according to the guidelines prescribed by the board and to consider the recommendations of any licentiates designated by the board to serve as consultants on the admission of the licentiate to the diversion program.

(b) To review and designate those treatment facilities to which licentiates in a diversion program may be referred.

(c) To receive and review information concerning a licentiate participating in the program.

(d) To consider in the case of each licentiate participating in a program whether he or she may with safety continue or resume the practice of dentistry.

(e) To perform such other related duties as the board may by regulation require.

1696. Closed sessions

Notwithstanding the provisions of Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code, relating to public meetings, a committee may convene in closed session to consider reports pertaining to any licentiate requesting or participating in a diversion program. A committee shall only convene in closed session to the extent that it is necessary to protect the privacy of such a licentiate.

1697. Necessity of cooperation in program

Each licentiate who requests participation in a diversion program shall agree to cooperate with the treatment program designed by a committee and to bear all costs related to the program, unless the cost is waived by the board. Any failure to comply with the provisions of a treatment program may result in termination of the licentiate's participation in a program.

1698. Destruction and confidentiality of records

(a) After a committee in its discretion has determined that a licentiate has been rehabilitated and the diversion program is completed, the committee shall purge and destroy all records pertaining to the licentiate's participation in a diversion program.

(b) Except as authorized by subdivision (f) of Section 1695.5, all board and committee records and records of proceedings pertaining to the treatment of a licentiate in a program shall be kept confidential and are not subject to discovery or subpoena.

1699. Representation in defamation action

The board shall provide for the representation of any person making reports to a committee or the board under this article in any action for defamation for reports or information given to the committee or the board regarding a licensee's participation in the diversion program.

Article 5 Offenses Against This Chapter

1700. Misdemeanor offenses

Any person, company, or association is guilty of a misdemeanor, and upon conviction thereof shall be punished by imprisonment in the county jail not less than 10 days nor more than one year, or by a fine of not less than one hundred dollars (\$100) nor more than one thousand five hundred dollars (\$1,500), or by both fine and imprisonment, who:

(a) Assumes the degree of "doctor of dental surgery," "doctor of dental science," or "doctor of dental medicine" or appends the letters "D.D.S.," or "D.D.Sc." or "D.M.D." to his or her name without having had the right to assume the title conferred upon him or her by diploma from a recognized dental college or school legally empowered to confer the same.

(b) Assumes any title, or appends any letters to his or her name, with the intent to represent falsely that he or she has received a dental degree or license.

(c) Engages in the practice of dentistry without causing to be displayed in a conspicuous place in his or her office the name of each and every person employed there in the practice of dentistry.

(d) Within 10 days after demand is made by the executive officer of the board, fails to furnish to the board the name and address of all persons practicing or assisting in the practice of dentistry in the office of the person, company, or association, at any time within 60 days prior to the demand, together with a sworn statement showing under and by what license or authority this person, company, or association and any employees are or have been practicing dentistry. This sworn statement shall not be used in any prosecution under this section.

(e) Is under the influence of alcohol or a controlled substance while engaged in the practice of dentistry in actual attendance on patients to an extent that impairs his or her ability to conduct the practice of dentistry with safety to patients and the public.

1700.5. Right to use "D.D.S" appellation

Notwithstanding Section 1700, any person who holds a valid, unrevoked, and unsuspended

certificate as a dentist under this chapter may append the letters "D.D.S." to his or her name, regardless of the degree conferred upon him or her by the dental college from which the licensee graduated.

1701. Acts constituting misdemeanor or felony

Any person is for the first offense guilty of a misdemeanor and shall be punishable by a fine of not less than two hundred dollars (\$200) or more than three thousand dollars (\$3,000), or by imprisonment in the county jail for not to exceed six months, or both, and for the second or a subsequent offense is guilty of a felony and upon conviction thereof shall be punished by a fine of not less than two thousand dollars (\$2,000) nor more than six thousand dollars (\$6,000), or by imprisonment in the state prison, or by both such fine and imprisonment, who:

(a) Sells or barter or offers to sell or barter any dental degree or any license or transcript made or purporting to be made pursuant to the laws regulating the license and registration of dentists.

(b) Purchases or procures by barter any such diploma, license or transcript with intent that the same shall be used in evidence of the holder's qualification to practice dentistry, or in fraud of the laws regulating such practice.

(c) With fraudulent intent, makes or attempts to make, counterfeits or alters in a material regard any such diploma, certificate or transcript.

(d) Uses, attempts or causes to be used, any such diploma, certificate or transcript which has been purchased, fraudulently issued, counterfeited or materially altered, either as a license to practice dentistry, or in order to procure registration as a dentist.

(e) In an affidavit, required of an applicant for examination, license or registration under this chapter, willfully makes a false statement in a material regard.

(f) Practices dentistry or offers to practice dentistry as it is defined in this chapter, either without a license, or when his license has been revoked or suspended.

(g) Under any false, assumed or fictitious name, either as an individual, firm, corporation or otherwise, or any name other than the name under which he is licensed, practices, advertises or in any other manner indicates that he is practicing or will practice dentistry, except such name as is specified in a valid permit issued pursuant to Section 1701.5.

1701.1. Criminal acts

Any person who willfully, under circumstances or conditions which cause or create risk of bodily

harm, serious physical or mental illness, or death, practices or attempts to practice, or advertises or holds himself or herself out as practicing dentistry without having at the time of so doing a valid, unrevoked, and unsuspended certificate as provided in this chapter, or without being authorized to perform that act pursuant to a certificate obtained in accordance with some other provision of law, is guilty of a crime, punishable by imprisonment in a county jail for up to one year. The remedy provided in this section shall not preclude any other remedy provided by law.

1701.5. Permit to practice under name of association, partnership, corporation, or group

Any association or partnership or corporation or group of three or more dentists, engaging in practice under any name that would otherwise be in violation of Section 1701 may practice under this name if, and only if, the association, partnership, corporation or group holds an outstanding, unexpired, unsuspended, and unrevoked permit issued by the board under this section. On and after July 1, 1995, any individual dentist or pair of dentists engaging in the practice of dentistry under any name that would otherwise be in violation of Section 1701 may practice under that name if and only if the dentist or pair of dentists hold an outstanding, unexpired, unsuspended, and unrevoked permit issued by the board under this section. The board shall issue written permits authorizing the holder to use a name specified in the permit in connection with the holder's practice if, and only if, the board finds to its satisfaction that:

- (a) The applicant or applicants are duly licensed dentists.
- (b) The place or establishment, or the portion thereof, where the applicant or applicants practice, is owned or leased by the applicant or applicants, and the practice conducted at the place or establishment, or portion thereof, is wholly owned and entirely controlled by the applicant or applicants.
- (c) The name that the applicant or applicants propose to operate contains at least one of the following designations: "dental group," "dental practice," or "dental office" and contains the family name of one or more of the past, present, or prospective associates, partners, shareholders, or members of the group, and is in conformity with Section 651 and subdivisions (i) and (l) of Section 1680.
- (d) All licensed persons practicing at the location designated in the application hold valid and outstanding licenses and that no charges of unprofessional conduct are pending against any persons practicing at that location.

Permits issued under this section by the board shall expire and become invalid unless renewed at the times and in the manner provided for the renewal of certificates issued under this chapter.

Any permits issued under this section may be revoked or suspended at any time that the board finds that any one of the requirements for original issuance of a permit is no longer being fulfilled by the holder to whom the permit was issued. Proceedings for revocation or suspension shall be governed by the Administrative Procedure Act.

In the event charges of unprofessional conduct are filed against the holder of a permit issued under this section, or a member of an association or partnership or a member of a group or corporation to whom a permit has been issued under this section, proceedings shall not be commenced for revocation or suspension of the permit until final determination of the charges of unprofessional conduct and unless the charges have resulted in revocation or suspension of license.

1702. Degrees from reputable colleges

Nothing in this article shall prohibit the conferring of degrees and the bestowing of diplomas by reputable dental colleges of this State which have been approved by the board.

1703. Prosecutions

The board, or any member or officer thereof, may prefer a complaint for violation of this chapter, or any part thereof, before any court of competent jurisdiction, and may by its officers, counsel and agents, assist in presenting the law or facts at the trial. The district attorney of each county in this State shall prosecute all violations of this chapter in their respective counties in which the violations occur.

1705. Injunctions against unlicensed practice

In addition to the other proceedings provided for in this chapter, the superior court of any county, on application of the board, shall issue an injunction to restrain any unlicensed person from carrying on or conducting the practice of dentistry as defined in this chapter.

1705.5. Injunctions against violations

Whenever any person has engaged or is about to engage in any acts or practices which constitute or will constitute an offense against this chapter, the superior court of any county, on application of 10 or more persons holding licenses to practice dentistry issued under this chapter, may issue an injunction or other appropriate order restraining such conduct. Proceedings under this section shall

be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure.

1706. Marking of dentures for identification

Every complete upper or lower denture fabricated by a licensed dentist, or fabricated pursuant to the dentist's work order, shall be marked with the patient's name or social security number, unless the patient objects. The initials of the patient may be shown alone, if use of the name of the patient is not practical. The markings shall be done during fabrication and shall be permanent, legible, and cosmetically acceptable. The exact location of the markings and the methods used to implant or apply them shall be determined by the dentist or dental laboratory fabricating the denture. The dentist shall inform the patient that the markings are to be used for identification only and the patient shall have the choice of which marking is to appear on the dentures.

The dentist shall retain the records of those marked dentures and shall not release the records to any person except by enforcement officers, in the event of an emergency requiring personal identification by means of dental records, or to anyone authorized by the patient.

Article 6 Fees

1715. Expiration of licenses

Licenses issued under the provisions of this chapter, unless specifically excepted, expire at 12 midnight on the legal birth date of a licensee of the board during the second year of a two-year term if not renewed. The board shall establish procedures for the administration of the birth date renewal program, including, but not limited to, the establishment of a pro rata formula for the payment of fees by licensees affected by the implementation of such program and the establishment of a system of staggered license expiration dates such that a relatively equal number of licenses expire annually.

1715.1. Applicability of provisions to permission to conduct additional places of practice

The provisions of Sections 1715, 1716, 1717, 1718, 1718.1, 1718.2, and 1718.3 shall also apply to and govern the expiration, renewal, restoration, reinstatement, and reissuance of permission to conduct an additional place of practice.

1716. Payment of renewal fees

Nothing contained in this chapter shall exempt from the payment of the renewal fee any person authorized to practice dentistry in the State of California, and every person practicing dentistry in this State shall pay the renewal fee irrespective of the time when he was licensed or first had the right to lawfully practice dentistry in this State or elsewhere.

1716.1. Reduction of renewal fee

(a) Notwithstanding Section 1716, the board may, by regulation, reduce the renewal fee for a licensee who has practiced dentistry for 20 years or more in this state, has reached the age of retirement under the federal Social Security Act (42 U.S.C. Sec. 301 et seq.), and customarily provides his or her services free of charge to any person, organization, or agency. In the event that charges are made, these charges shall be nominal. In no event shall the aggregate of these charges in any single calendar year be in an amount that would render the licensee ineligible for full social security benefits. The board shall not reduce the renewal fee under this section to an amount less than one-half of the regular renewal fee.

(b) Notwithstanding Section 1716, any licensee who demonstrates to the satisfaction of the board that he or she is unable to practice dentistry due to a disability, may request a waiver of 50 percent of the renewal fee. The granting of a waiver shall be at the discretion of the board, and the board may terminate the waiver at any time. A licensee to whom the board has granted a waiver pursuant to this subdivision shall not engage in the practice of dentistry unless and until the licensee pays the current renewal fee in full and establishes to the satisfaction of the board, on a form prescribed by the board and signed under penalty of perjury, that the licensee's disability either no longer exists or no longer affects his or her ability to safely practice dentistry.

1717. Renewal applications

To renew an unexpired license, the licensee shall, before the time at which the license would otherwise expire, apply for renewal on a form prescribed by the board and pay the renewal fee prescribed by this chapter. The receipt of the executive officer shall be indispensable evidence that payment has been made.

1718. Renewal of expired licenses

Except as otherwise provided in this chapter, an expired license may be renewed at any time within five years after its expiration on filing of application for renewal on a form prescribed by the board, and

payment of all accrued renewal and delinquency fees. If the license is renewed more than 30 days after its expiration, the licensee, as a condition precedent to renewal, shall also pay the delinquency fee prescribed by this chapter. Renewal under this section shall be effective on the date on which the application is filed, on the date on which the renewal fee is paid, or on the date on which the delinquency fee, if any, is paid, whichever last occurs. If so renewed, the license shall continue in effect through the expiration date provided in Section 1715 which next occurs after the effective date of the renewal, when it shall expire if it is not again renewed.

1718.1. Renewal of suspended licenses

A suspended license is subject to expiration and shall be renewed as provided in this article, but such renewal does not entitle the licensee, while the license remains suspended and until it is reinstated, to engage in the licensed activity, or in any other activity or conduct in violation of the order or judgment by which the license was suspended.

1718.2. Reinstatement of revoked licenses

A revoked license is subject to expiration as provided in this article, but it may not be renewed. If it is reinstated after its expiration, the licensee, as a condition precedent to its reinstatement, shall pay a reinstatement fee in an amount equal to the renewal fee in effect on the last regular renewal date before the date on which it is reinstated, plus the delinquency fee, if any, accrued at the time of its revocation.

1718.3. Cancellation of license

(a) A license which is not renewed within five years after its expiration may not be renewed, restored, reinstated, or reissued thereafter, but the holder of the license may apply for and obtain a new license if the following requirements are satisfied:

(1) No fact, circumstance, or condition exists which would justify denial of licensure under Section 480.

(2) He or she pays all of the fees which would be required of him or her if he or she were then applying for the license for the first time and all renewal and delinquency fees which have accrued since the date on which he or she last renewed his or her license.

(3) He or she takes and passes the examination, if any, which would be required of him or her if he or she were then applying for the license for the first time, or otherwise establishes to the satisfaction of the board that with due regard

for the public interest, he or she is qualified to practice the profession or activity in which he or she again seeks to be licensed.

(b) The board may impose conditions on any license issued pursuant to this section, as it deems necessary.

(c) The board may by regulation provide for the waiver or refund of all or any part of the examination fee in those cases in which a license is issued without an examination under this section.

1719. Disposition of fines and bail forfeitures

Upon collection by the proper officer of the court, 75 percent of the fines or forfeitures of bail in any case in which any person is charged with a violation of the provisions of this chapter shall be paid to the executive officer of the board and the balance, or 25 percent of the fines or forfeitures of bail, shall be paid to the county where the action is tried.

1720. Deposit and report of moneys

The executive officer shall on or before the 10th day of each month pay to the State Treasury and report to the Controller all fines, penalties, and forfeitures received for violations of this chapter, together with all examination, renewal, and license fees received by him or her prior to the date of the report and payment.

1721. State Dentistry Fund

Except as provided in Section 1721.5, all funds received by the State Treasurer under the authority of this chapter shall be placed in the State Dentistry Fund. Except as provided in Section 1721.5, all disbursements by the board made in the transaction of its business and in the enforcement of this chapter shall be paid out of the fund upon claims against the state.

1721.5. State Dental Auxiliary Fund

All funds received by the State Treasurer under the authority of this chapter which relate to dental auxiliaries shall be placed in the State Dental Auxiliary Fund, which fund is continuously appropriated for the purposes of administering this chapter as it relates to dental auxiliaries.

1722. Revolving fund

The amount of seven hundred dollars (\$700) of the fund shall constitute a revolving fund and may be drawn upon the warrant of the president and secretary of the board without being audited in the usual manner, in cases of emergency or where cash advances are necessary. However, after the

sum of seven hundred dollars (\$700) has been so expended, no further warrant shall be drawn on the revolving fund until expenditures previously made from it shall be substantiated by vouchers and itemized statements and audited. All expenditures from the revolving fund shall, at the end of each fiscal year, or at any other time when demand therefor is made by the Director of Finance or by the State Controller, be so substantiated and audited unless previously done.

1723. Fines, penalties and forfeitures

All fines, penalties, and forfeitures, including the examination fee, imposed or collected by the board under any provision of this chapter shall be paid to the executive officer.

1724. Fee schedule for dentists

The amount of charges and fees for dentists licensed pursuant to this chapter shall be established by the board as is necessary for the purpose of carrying out the responsibilities required by this chapter as it relates to dentists, subject to the following limitations:

- (a) The fee for application for examination shall not exceed five hundred dollars (\$500).
- (b) The fee for application for reexamination shall not exceed one hundred dollars (\$100).
- (c) The fee for examination and for reexamination shall not exceed eight hundred dollars (\$800). Applicants who are found to be ineligible to take the examination shall be entitled to a refund in an amount fixed by the board.
- (d) The fee for an initial license and for the renewal of a license shall not exceed four hundred fifty dollars (\$450).
- (e) The delinquency fee shall be the amount prescribed by Section 163.5.
- (f) The penalty for late registration of change of place of practice shall not exceed seventy-five dollars (\$75).
- (g) The application fee for permission to conduct an additional place of practice shall not exceed two hundred dollars (\$200).
- (h) The renewal fee for an additional place of practice shall not exceed one hundred dollars (\$100).
- (i) The fee for issuance of a substitute certificate shall not exceed one hundred twenty-five dollars (\$125).
- (j) The fee for a provider of continuing education shall not exceed two hundred fifty dollars (\$250) per year.
- (k) The fee for application for a referral service permit and for renewal of that permit shall not exceed twenty-five dollars (\$25).

(l) The fee for application for an extramural facility permit and for the renewal of a permit shall not exceed twenty-five dollars (\$25). The board shall report to the appropriate fiscal committees of each house of the Legislature whenever the board increases any fee pursuant to this section and shall specify the rationale and justification for that increase.

1724.5. Permit to practice dentistry under name of association, partnership, corporation, or group

The amount of fees payable in connection with permits issued under Section 1701.5 is as follows:

- (a) The initial permit fee is an amount equal to the renewal fee for the applicant's license to practice dentistry in effect on the last regular renewal date before the date on which the permit is issued, except that, if the permit will expire less than one year after its issuance, then the initial permit fee is an amount equal to 50 percent of the renewal fee in effect on the last regular renewal date before the date on which the permit is issued.
- (b) The renewal and delinquency fees shall be fixed by the board at not more than the then current amount of the renewal fee for a license to practice dentistry nor less than five dollars (\$5).

1725. Fee schedule for dental auxiliaries

The amount of the fees prescribed by this chapter that relate to the licensing of dental auxiliaries shall be established by board resolution and subject to the following limitations:

- (a) The application fee for an original license shall not exceed twenty dollars (\$20).
- (b) The fee for examination for licensure as a registered dental assistant shall not exceed fifty dollars (\$50) for the written examination and shall not exceed sixty dollars (\$60) for the practical examination.
- (c) The fee for examination for licensure as a registered dental assistant in extended functions shall not exceed two hundred fifty dollars (\$250).
- (d) The fee for examination for licensure as a registered dental hygienist shall not exceed two hundred twenty dollars (\$220).
- (e) The fee for examination for licensure as a registered dental hygienist in extended functions shall not exceed two hundred fifty dollars (\$250).
- (f) The board shall establish the fee at an amount not to exceed actual cost for licensure as a registered dental hygienist in alternative practice.
- (g) The biennial renewal fee for a dental auxiliary whose license expires on or after January 1, 1991, shall not exceed sixty dollars (\$60). On or after January 1, 1992, the board may set the renewal

fee in an amount not to exceed eighty dollars (\$80).

(h) The delinquency fee shall not exceed twenty-five dollars (\$25) or one-half of the renewal fee, whichever is greater. Any delinquent license may be restored only upon payment of all fees, including the delinquency fee.

(i) The fee for issuance of a duplicate registration, license, or certificate to replace one that is lost or destroyed, or in the event of a name change, shall not exceed twenty-five dollars (\$25).

(j) The fee for each curriculum review and site evaluation for educational programs for registered dental assistants which are not accredited by a board-approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed one thousand four hundred dollars (\$1,400). (k) The fee for each curriculum review and site evaluation for radiation safety courses that are not accredited by a board approved agency, the Council for Private Postsecondary and Vocational Education, or the Chancellor's office of the California Community Colleges shall not exceed three hundred dollars (\$300).

(l) No fees or charges other than those listed in subdivisions (a) through (k) above shall be levied by the board in connection with the licensure of dental auxiliaries, registered dental assistants educational program site evaluations and radiation safety course site evaluations pursuant to this chapter.

(m) Fees fixed by the board pursuant to this section shall not be subject to the approval of the Office of Administrative Law.

(n) Fees collected pursuant to this section shall be deposited in the State Dental Auxiliary Fund.

Article 7 Dental Auxiliaries

1740. Legislative intent

It is the intention of the Legislature by enactment of this article to permit the full utilization of dental auxiliaries in order to meet the dental care needs of all the state's citizens. The Legislature further intends that the classifications of dental auxiliaries established pursuant to this article constitute a career ladder, permitting the continual advancement of persons to successively higher levels of licensure with additional training, and without repeating training for skills already acquired. The Legislature further intends that the Board of Dental Examiners of the State of California and its Committee on Dental Auxiliaries, in implementing this article, give specific

consideration to the recommendations of the Advisory Committee on Utilization and Education of Dental Auxiliaries, established pursuant to Chapter 645 of the Statutes of 1972, and contained in its report to the Legislature dated March 20, 1973.

1741. Definitions

As used in this article:

(a) "Board" means the Dental Board of California.

(b) "Committee" means the Committee on Dental Auxiliaries.

(c) "Direct supervision" means supervision of dental procedures based on instructions given by a licensed dentist, who must be physically present in the treatment facility during the performance of those procedures.

(d) "General supervision" means supervision of dental procedures based on instructions given by a licensed dentist but not requiring the physical presence of the supervising dentist during the performance of those procedures.

(e) "Dental auxiliary" means a person who may perform dental assisting or dental hygiene procedures authorized by this article. Dental auxiliary also means a registered dental hygienist in alternative practice, who may provide authorized services by prescription provided by a dentist or physician and surgeon licensed to practice in this state. "Dental auxiliary" includes all of the following:

(1) A dental assistant pursuant to Section 1750.

(2) A registered dental assistant pursuant to Section 1753.

(3) A registered dental assistant in extended functions pursuant to Section 1756.

(4) A registered dental hygienist pursuant to Section 1766.

(5) A registered dental hygienist in extended functions pursuant to Section 1768.

(6) A registered dental hygienist in alternative practice pursuant to Section 1774.

1742. Committee on Dental Auxiliaries; Areas of responsibility and duties

(a) There is within the jurisdiction of the board a Committee on Dental Auxiliaries.

(b) The Committee on Dental Auxiliaries shall have the following areas of responsibility and duties:

(1) The committee shall have the following duties and authority related to education programs and curriculum:

(A) Shall evaluate all dental auxiliary programs applying for board approval in accordance with board rules governing the programs.

(B) May appoint board members to any evaluation committee. Board members so appointed shall not make a final decision on the issue of program or course approval.

(C) Shall report and make recommendations to the board as to whether a program or course qualifies for approval. The board retains the final authority to grant or deny approval to a program or course.

(D) Shall review and document any alleged deficiencies that might warrant board action to withdraw or revoke approval of a program or course, at the request of the board.

(E) May review and document any alleged deficiencies that might warrant board action to withdraw or revoke approval of a program or course, at its own initiation.

(2) The committee shall have the following duties and authority related to applications:

(A) Shall review and evaluate all applications for licensure in the various dental auxiliary categories to ascertain whether a candidate meets the appropriate licensing requirements specified by statute and board regulations.

(B) Shall maintain application records, cashier application fees, and perform any other ministerial tasks as are incidental to the application process.

(C) May delegate any or all of the functions in this paragraph to its staff.

(D) Shall issue auxiliary licenses in all cases, except where there is a question as to a licensing requirement. The board retains final authority to interpret any licensing requirement. If a question arises in the area of interpreting any licensing requirement, it shall be presented by the committee to the board for resolution.

(3) The committee shall have the following duties and authority regarding examinations:

(A) Shall advise the board as to the type of license examination it deems appropriate for the various dental auxiliary license categories.

(B) Shall, at the direction of the board, develop or cause to be developed, administer, or both, examinations in accordance with the board's instructions and periodically report to the board on the progress of those examinations. The following shall apply to the examination procedure:

(i) The examination shall be submitted to the board for its approval prior to its initial administration.

(ii) Once an examination has been approved by the board, no further approval is required unless a major modification is made to the examination.

(iii) The committee shall report to the board on the results of each examination and shall, where appropriate, recommend pass points.

(iv) The board shall set pass points for all dental auxiliary licensing examinations.

(C) May appoint board members to any examination committee established pursuant to subparagraph (B).

(4) The committee shall periodically report and make recommendations to the board concerning the level of fees for dental auxiliaries and the need for any legislative fee increase. However, the board retains final authority to set all fees.

(5) The committee shall be responsible for all aspects of the license renewal process, which shall be accomplished in accordance with this chapter and board regulations. The committee may delegate any or all of its functions under this paragraph to its staff.

(6) The committee shall have no authority with respect to the approval of continuing education providers; the board retains all of this authority.

(7) The committee shall advise the board as to appropriate standards of conduct for auxiliaries, the proper ordering of enforcement priorities, and any other enforcement-related matters that the board may, in the future, delegate to the committee. The board shall retain all authority with respect to the enforcement actions, including, but not limited to, complaint resolution, investigation, and disciplinary action against auxiliaries.

(8) The committee shall have the following duties regarding regulations:

(A) To review and evaluate all suggestions or requests for regulatory changes related to dental auxiliaries.

(B) To report and make recommendations to the board, after consultation with departmental legal counsel and the board's executive officer.

(C) To include in any report regarding a proposed regulatory change, at a minimum, the specific language of the proposed changes and the reasons for and facts supporting the need for the change. The board has the final rulemaking authority.

(c) This section shall become inoperative on July 1, 2004, and, as of January 1, 2005, is repealed, unless a later enacted statute which becomes effective on or before January 1, 2005, deletes or extends the dates on which it becomes inoperative and is repealed. The repeal of this section renders the committee subject to the review required by Division 1.2 (commencing with Section 473).

1742.1. Protection of the public

Protection of the public shall be the highest priority for the Committee on Dental Auxiliaries in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be

promoted, the protection of the public shall be paramount.

1743. Committee membership

The committee shall consist of the following nine members:

(a) One member who is a public member of the board, one member who is a licensed dentist and who has been appointed by the board as an examiner pursuant to Section 1621, one member who is a licensed dentist who is neither a board member nor appointed by the board as an examiner pursuant to Section 1621, three members who are licensed as registered dental hygienists, at least one of whom is actively employed in a private dental office, and three members who are licensed as registered dental assistants. If available, an individual licensed as a registered dental hygienist in extended functions shall be appointed in place of one of the members licensed as a registered dental hygienist. If available, an individual licensed as a registered dental assistant in extended functions shall be appointed in place of one of the members licensed as a registered dental assistant.

(b) The public member of the board shall not have been licensed under Chapter 4 (commencing with Section 1600) of the Business and Professions Code within five years of the appointment date and shall not have any current financial interest in a dental-related business.

1744. Appointment; Terms; Removal

(a) The members of the committee shall be appointed by the Governor. The terms of the member who is a board member and the member who has been appointed by the board as an examiner pursuant to Section 1621 shall expire December 31, 1976. The terms of the member who is a licensed dentist and one member who is a dental assistant and one member who is licensed as a registered dental hygienist shall expire on December 31, 1977. The terms of all other members shall expire on December 31, 1978. Thereafter, appointments shall be for a term of four years.

(b) No member shall serve as a member of the committee for more than two consecutive terms. Vacancies shall be filled by appointment for the unexpired terms. The committee shall annually elect one of its members as chairperson.

(c) The Governor shall have the power to remove any member of the committee from office for neglect of any duty required by law or for incompetence or unprofessional or dishonorable conduct.

1745. Compensation and expenses

Each member of the committee shall receive a per diem and expenses as provided in Section 103.

1746. Employees of committee

The committee may employ such employees as it may deem necessary to carry out the functions and responsibilities prescribed by this article.

1746.1. Evaluation of suggestions or request for regulatory changes; informational hearings and report

The committee shall evaluate all suggestions or requests for regulatory changes related to auxiliaries. The committee shall have the authority to hold informational hearings in order to report and make appropriate recommendations to the board, after consultation with departmental legal counsel and the board's chief executive officer. The committee shall include in any report regarding a proposed regulatory change, at a minimum, the specific language or the proposed change or changes and the reasons therefor and any facts supporting the need for the change.

1747. Denial, suspension, or revocation of licenses

The procedure on all matters relating to the denial, suspension, or revocation of licenses granted under this article shall be governed by the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

1748. Recommendations

Recommendations by the committee pursuant to this article shall be approved, modified, or rejected by the board within 90 days of submission of the recommendation to the board. If the board rejects or significantly modifies the intent or scope of the recommendation, the committee may request that the board provide its reasons in writing for rejecting or significantly modifying the recommendation.

1749. Meetings

(a) The committee shall meet at least four times annually. The committee shall conduct additional meetings as are necessary in appropriate locations to conclude its business. Special meetings may be held at the time and place the committee designates.

(b) Notice of each meeting of the committee shall be given at least two weeks in advance to those persons and organizations who express an interest in receiving such notification.

(c) The committee shall obtain permission of the director to meet more than six times annually. The director shall approve the meetings that are necessary for the committee to fulfill its legal responsibilities.

1749.1. Examination in law and ethics

In addition to any other examination required by this article, the board may require applicants for licensure under this article to successfully complete an examination in California law and ethics.

1750. Dental assistant defined

A dental assistant is a person who may perform basic supportive dental procedures as authorized by this article under the supervision of a licensed dentist and who may perform basic supportive procedures as authorized pursuant to subdivision (b) of Section 1751 under the supervision of a registered dental hygienist in alternative practice.

1751. Functions of dental assistants

(a) By September 15, 1993, the board, upon recommendation of the committee, consistent with this article, standards of good dental practice, and the health and welfare of patients, shall adopt regulations relating to the functions that may be performed by dental assistants under direct or general supervision, and the settings within which dental assistants may work. At least once every seven years thereafter, the board shall review the list of functions performable by dental assistants, the supervision level, and settings under which they may be performed, and shall update the regulations as needed to keep them current with the state of the practice.

(b) Under the supervision of a registered dental hygienist in alternative practice, a dental assistant may perform intraoral retraction and suctioning.

1752. Determination of assistant's competency

The supervising licensed dentist shall be responsible for determining the competency of the dental assistant to perform allowable functions.

1753. Licensing as RDA

The board shall license as a registered dental assistant a person who submits written evidence, satisfactory to the board, of either one of the following requirements:

(a) Graduation from an educational program in dental assisting approved by the board, and satisfactory performance on a written examination required by the board. On and after January 1, 1984, every applicant seeking licensure as a

registered dental assistant pursuant to this subdivision shall provide evidence of his or her satisfactory performance on a written and practical examination required by the board.

(b) Satisfactory work experience of more than 12 months as a dental assistant in California or another state and satisfactory performance on a written and practical examination required by the board. The board shall give credit toward the 12 months work experience referred to in this subdivision to persons who have graduated from a dental assisting program in a postsecondary institution approved by the Department of Education or in a secondary institution, regional occupational center, or regional occupational program, that are not, however, approved by the board pursuant to subdivision (a). The credit shall equal the total weeks spent in classroom training and internship on a week-for-week basis not to exceed 16 weeks. The board, in cooperation with the Superintendent of Public Instruction, shall establish the minimum criteria for the curriculum of nonboard-approved programs. Additionally, the board shall notify those programs only if the program's curriculum does not meet established minimum criteria, as established for board-approved registered dental assistant programs, except any requirement that the program be given in a postsecondary institution. Graduates of programs not meeting established minimum criteria shall not qualify for satisfactory work experience as defined by this section.

1753.5. Radiation safety and coronal polishing course requirements for RDAs

In addition to the requirements of Section 1753, each applicant for registered dental assistant licensure on or after July 1, 2002, shall provide evidence of having successfully completed board-approved courses in radiation safety and coronal polishing as a condition of licensure. The length and content of the courses shall be governed by applicable board regulations.

1754. Functions of RDAs

By September 15, 1993, the board, upon recommendation of the committee and consistent with this article, standards of good dental practice, and the health and welfare of patients, shall adopt regulations relating to the functions which may be performed by registered dental assistants under direct or general supervision, and the settings within which registered dental assistants may work. At least once every seven years thereafter, the board shall review the list of functions performable by registered dental assistants, the supervision level, and settings under which they may be

performed, and shall update the regulations as needed to keep them current with the state of the practice.

1756. Licensing as RDAEF

The board shall license as a registered dental assistant in extended functions a person who satisfies all of the following requirements:

- (a) Status as a registered dental assistant.
- (b) Completion of clinical training approved by the board in a facility affiliated with a dental school under the direct supervision of the dental school faculty.
- (c) Satisfactory performance on an examination required by the board.

1757. Functions of EFs

Within one year of the date this article takes effect, the board, upon recommendation of the committee, consistent with standards of good dental practice and the health and welfare of patients, shall prescribe by regulation the functions which may be performed by registered dental assistants in extended functions, whether such functions require direct or general supervision, and the settings within which registered dental assistants in extended functions may work.

1760. Functions of RDHs

The following functions may be performed by a registered dental hygienist in addition to those authorized pursuant to Sections 1760.5, 1761, 1762, 1763, and 1764:

- (a) All functions that may be performed by a dental assistant or a registered dental assistant.
- (b) All persons holding a license as a registered dental hygienist on January 1, 2003, or issued a license on or before December 31, 2005, are authorized to perform the duties of a registered dental assistant specified in Section 1754. All persons issued a license as a registered dental hygienist on and after January 1, 2006, shall qualify for and receive a registered dental assistant license prior to performance of the duties specified in Section 1754.

1760.5. Practice of dental hygiene

- (a) The practice of dental hygiene includes dental hygiene assessment, development, planning, and implementation of a dental hygiene care plan. It also includes oral health education, counseling, and health screenings.
- (b) The practice of dental hygiene does not include any of the following procedures:
 - (1) Diagnosis and comprehensive treatment planning.

(2) Placing, condensing, carving, or removal of permanent restorations.

(3) Surgery or cutting on hard and soft tissue including, but not limited to, the removal of teeth and the cutting and suturing of soft tissue.

(4) Prescribing medication.

(5) Administering local or general anesthesia or oral or parenteral conscious sedation, except for the administration of nitrous oxide and oxygen, whether administered alone or in combination with each other, or local anesthesia pursuant to Section 1761.

1761. Dental hygiene direct supervision duties

A dental hygienist is authorized to perform the following procedures under direct supervision, after submitting to the board evidence of satisfactory completion of a board-approved course of instruction in the procedures:

- (a) Soft-tissue curettage.
- (b) Administration of local anesthesia.
- (c) Administration of nitrous oxide and oxygen, whether administered alone or in combination with each other.

1762. Dental hygiene general supervision duties

A dental hygienist is authorized to perform the following procedures under general supervision:

- (a) Preventive and therapeutic interventions, including oral prophylaxis, scaling, and root planing.
- (b) Application of topical, therapeutic, and subgingival agents used for the control of caries and periodontal disease.
- (c) The taking of impressions for bleaching trays and application and activation of agents with nonlaser, light-curing devices.
- (d) The taking of impressions for bleaching trays and placements of in-office, tooth-whitening devices.

1763. Allowable dental hygiene duties without supervision

- (a) A dental hygienist may provide, without supervision, educational services, oral health training programs, and oral health screenings.
- (b) A dental hygienist shall refer any screened patients with possible oral abnormalities to a dentist for a comprehensive examination, diagnosis, and treatment plan.
- (c) In any public health program created by federal, state, or local law or administered by a federal, state, county, or local governmental entity, a dental hygienist may provide, without supervision, dental hygiene preventive services in addition to oral screenings, including, but not

limited to, the application of fluorides and pit and fissure sealants.

1764. Dental hygiene supervision; Allowable settings; Use of materials and devices

(a) Any procedure performed or service provided by a dental hygienist that does not specifically require direct supervision shall require general supervision, so long as it does not give rise to a situation in the dentist's office requiring immediate services for alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable dental conditions, which, if not immediately diagnosed and treated, would lead to serious disability or death.

(b) Unless otherwise specified in this chapter, a dental hygienist may perform any procedure or provide any service within the scope of his or her practice in any setting, so long as the procedure is performed or the service is provided under the appropriate level of supervision required by this article.

(c) A dental hygienist may use any material or device approved for use in the performance of a service or procedure within his or her scope of practice under the appropriate level of supervision, if the dental hygienist has the appropriate education and training required to use the material or device.

1765. Persons who may practice dental hygiene

No person other than a licensed dental hygienist or a licensed dentist may engage in the practice of dental hygiene or perform dental hygiene procedures on patients, including, but not limited to, supragingival and subgingival scaling, dental hygiene assessment, and treatment planning, except for the following persons:

(a) A student enrolled in a dental or a dental hygiene school who is performing procedures as part of the regular curriculum of that program under the supervision of the faculty of that program.

(b) A registered dental assistant acting in accordance with the rules of the board in applying topical agents used for the control of caries or polishing the coronal surfaces of teeth.

(c) A registered dental hygienist licensed in another jurisdiction performing a clinical demonstration for educational purposes.

1766. Licensing as a RDH

(a) The board shall license as a registered dental hygienist a person who satisfies all of the following requirements:

(1) Completion of an educational program for registered dental hygienists, approved by the

board, and accredited by the Commission on Dental Accreditation, and conducted by a degree-granting, postsecondary institution.

(2) Satisfactory performance on an examination required by the board.

(3) Satisfactory completion of a national written dental hygiene examination approved by the board.

(b) The board may grant a license as a registered dental hygienist to an applicant who has not taken an examination before the board, if the applicant submits all of the following to the board:

(1) A completed application form and all fees required by the board.

(2) Proof of a current license as a registered dental hygienist issued by another state that is not revoked, suspended, or otherwise restricted.

(3) Proof that the applicant has been in clinical practice as a registered dental hygienist or has been a full-time faculty member in an accredited dental hygiene education program for a minimum of 750 hours per year for at least five years preceding the date of his or her application under this section. The clinical practice requirement shall be deemed met if the applicant provides proof of at least three years of clinical practice and commits to completing the remaining two years of clinical practice by filing with the board a copy of a pending contract to practice dental hygiene in any of the following facilities:

(A) A primary care clinic licensed under subdivision (a) of Section 1204 of the Health and Safety Code.

(B) A primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code.

(C) A clinic owned or operated by a public hospital or health system.

(D) A clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.

(4) Proof that the applicant has not been subject to disciplinary action by any state in which he or she is or has been previously licensed as a registered dental hygienist or dentist. If the applicant has been subject to disciplinary action, the board shall review that action to determine if it warrants refusal to issue a license to the applicant.

(5) Proof of graduation from a school of dental hygiene accredited by the Commission on Dental Accreditation.

(6) Proof of satisfactory completion of the Dental Hygiene National Board Examination and of a state or regional clinical licensure examination.

(7) Proof that the applicant has not failed the examination for licensure to practice dental

hygiene under this chapter more than once or once within five years prior to the date of his or her application for a license under this section.

(8) Documentation of completion of a minimum of 25 units of continuing education earned in the two years preceding application, including completion of any continuing education requirements imposed by the board on registered dental hygienists licensed in this state at the time of application.

(9) Any other information as specified by the board to the extent that it is required of applicants for licensure by examination under this article.

(c) The board may periodically request verification of compliance with the requirements of paragraph (3) of subdivision (b), and may revoke the license upon a finding that the employment requirement or any other requirement of paragraph (3) has not been met.

(d) The board shall provide in the application packet to each out-of-state dental hygienist pursuant to this section the following information:

(1) The location of dental manpower shortage areas in the state.

(2) Any not-for-profit clinics, public hospitals, and accredited dental hygiene education programs seeking to contract with licensees for dental hygiene service delivery or training purposes.

(e) The board shall review the impact of this section on the availability of actively practicing dental hygienists in California and report to the appropriate policy and fiscal committees of the Legislature by January 1, 2006. The report shall include a separate section providing data specific to dental hygienists who intend to fulfill the alternative clinical practice requirements of subdivision (b). The report shall include, but not be limited to, the following:

(1) The number of applicants from other states who have sought licensure.

(2) The number of dental hygienists from other states licensed pursuant to this section, the number of licenses not granted under this section, and the reason why the license was not granted.

(3) The practice location of dental hygienists licensed pursuant to this section.

(4) The number of dental hygienists licensed pursuant to this section who establish a practice in a rural area or in an area designated as having a shortage of practicing dental hygienists or no dental hygienists or in a safety net facility identified in paragraph (3) of subdivision (b).

(5) The length of time dental hygienists licensed pursuant to this section practiced in the reported location.

(f) In identifying a dental hygienist's location of practice, the board shall use medical service study

areas or other appropriate geographic descriptions for regions of the state.

1767. Adoption of regulations implementing article

The board, upon recommendation of the committee, shall adopt regulations necessary to implement the provisions of this article.

1768. Licensing as RDHEF

The board shall license as a registered dental hygienist in extended functions a person who meets all of the following requirements:

(a) Holds a valid license issued pursuant to Section 1766 as a registered dental hygienist.

(b) Completes clinical training approved by the board in a facility affiliated with a dental school under the direct supervision of the dental school faculty.

(c) Performs satisfactorily on an examination required by the board.

1769. Functions of RDHEFs

The board, in consultation with the committee, shall adopt regulations necessary to define the functions that may be performed by registered dental hygienists in extended functions, whether the functions require direct or general supervision, and the settings within which registered dental hygienists in extended functions may work.

1770. Restriction on use of auxiliaries in extended functions

A licensed dentist may utilize in his or her practice no more than two dental auxiliaries in extended functions licensed pursuant to Sections 1756 and 1768.

1771. Misrepresentation of licensed status

Any person, other than a person who has been issued a license by the board, who holds himself or herself out as a registered dental assistant, registered dental assistant in extended functions, registered dental hygienist, registered dental hygienist in extended functions, or registered dental hygienist in alternative practice, or uses any other term indicating or implying he or she is licensed by the board in the aforementioned categories, is guilty of a misdemeanor.

1772. Injunctions

The board shall seek to obtain an injunction against any dental hygienist who provides services in alternative practice pursuant to Sections 1774 and 1775 if the board has reasonable cause to believe that the services are being provided to a patient who has not received a prescription for

those services from a dentist or physician and surgeon licensed to practice in this state.

1773. Renewal, restoration, reinstatement, and reissuance of licenses

The provisions of Sections 1715, 1718, 1718.1, 1718.2, and 1718.3 shall govern the renewal, restoration, reinstatement, and reissuance of licenses issued under this article.

The license shall continue in effect through the date provided in Section 1715 that next occurs after its issuance, when it shall expire if not renewed.

1774. Licensing of RDHAPs

(a) The board shall license as a registered dental hygienist in alternative practice a person who demonstrates satisfactory performance on an examination required by the board and, subject to Sections 1760 and 1766, who meets either of the following requirements:

(1) Holds a current California license as a dental hygienist and meets the following requirements:

(A) Has been engaged in clinical practice as a dental hygienist for a minimum of 2,000 hours during the immediately preceding 36 months.

(B) Has successfully completed a bachelor's degree or its equivalent from a college or institution of higher education that is accredited by a national agency recognized by the Council on Postsecondary Accreditation or the United States Department of Education, and a minimum of 150 hours of additional educational requirements, as prescribed by the board by regulation, that are consistent with good dental and dental hygiene practice, including, but not necessarily limited to, dental hygiene technique and theory including gerontology and medical emergencies, and business administration and practice management.

(2) Has received a letter of acceptance into the employment utilization phase of the Health Manpower Pilot Project No. 155 established by the Office of Statewide Health Planning and Development pursuant to Article 1 (commencing with Section 128125) of Chapter 3 of Part 3 of Division 107 of the Health and Safety Code.

(b) Subject to the provisions of subdivisions (b) and (h) of Section 1775, the board, in consultation with the committee, shall adopt regulations in accordance with Section 1748 necessary to implement this section.

(c) The Director of Consumer Affairs shall review the regulations adopted by the board in accordance with Section 313.1.

(d) A person licensed as a registered dental hygienist who has completed the prescribed classes through the Health Manpower Pilot Project

(HMPP) and who has established an independent practice under the HMPP by June 30, 1997, shall be deemed to have satisfied the licensing requirements under Section 1774, and shall be authorized to continue to operate the practice he or she presently operates, so long as he or she follows the requirements for prescription and functions as specified in this section and Section 1775, with the exception of subdivision (e) of Section 1775, and as long as he or she continues to personally practice and operate the practice or until he or she sells the practice to a licensed dentist.

1775. Responsibilities of RDHAPs

(a) A registered dental hygienist in alternative practice may practice, pursuant to Section 1774, as an employee of a dentist or of another registered dental hygienist in alternative practice, or as an independent contractor, or as a sole proprietor of an alternative dental hygiene practice, or as an employee of a primary care clinic or specialty clinic that is licensed pursuant to Section 1204 of the Health and Safety Code or as an employee of a primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code, or as an employee of a clinic owned or operated by a public hospital or health system, or as an employee of a clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.

(b) A registered dental hygienist in alternative practice may perform the duties authorized pursuant to Section 1774 in the following settings:

(1) Residences of the homebound.

(2) Schools.

(3) Residential facilities and other institutions.

(4) Dental health professional shortage areas, as certified by the Office of Statewide Health Planning and Development in accordance with existing office guidelines.

(c) A registered dental hygienist in alternative practice shall not do any of the following:

(1) Infer, purport, advertise, or imply that he or she is in any way able to provide dental services or make any type of dental health diagnosis beyond evaluating a patient's dental hygiene status, providing a dental hygiene treatment plan, and providing the associated dental hygiene services.

(2) Hire a registered dental hygienist to provide direct patient services other than a registered dental hygienist in alternative practice.

(d) A registered dental hygienist in alternative practice may submit or allow to be submitted any

insurance or third-party claims for patient services performed as authorized pursuant to this article.

(e) A registered dental hygienist in alternative practice may hire other registered dental hygienists in alternative practice to assist in his or her practice.

(f) A registered dental hygienist in alternative practice may hire and supervise dental assistants performing functions specified in subdivision (b) of Section 1751.

(g) A registered dental hygienist in alternative practice shall provide to the board documentation of an existing relationship with at least one dentist for referral, consultation, and emergency services.

(h) A registered dental hygienist in alternative practice may perform dental hygiene services for a patient who presents to the registered hygienist in alternative practice a written prescription for dental hygiene services issued by a dentist or physician and surgeon licensed to practice in this state who has performed a physical examination and a diagnosis of the patient prior to the prescription being provided. The prescription shall be valid for a time period based on the dentist's or physician and surgeon's professional judgment, but not to exceed 15 months from the date that it was issued.

CALIFORNIA CODE OF REGULATIONS

Title 16, Division 10

(NOTE: The following regulations have been adopted by the Dental Board of California to implement or make more specific the laws contained in the Dental Practice Act which appears above, and which begins with Section 1600 of the Business and Professions Code)

Chapter 1. General Provisions

Applicable to All Licensees.

Article 1. General Provisions

1000. Definitions.

For purposes of this chapter:

(a) "Academic year" means a period of education consisting of 45 quarter units, 30 semester units, or a duration deemed equivalent thereto by the board.

(b) "Act" means the Dental Practice Act.

(c) "Board" means the Dental Board of California.

(d) "Board office" means the board office located in Sacramento, California

(e) "Board's Executive officer" means the executive officer appointed by the board.

(f) "Code" means the Business and Professions Code.

(g) "Committee," unless otherwise indicated, means the Committee on Dental Auxiliaries.

(h) "Competencies" means statements describing the abilities needed to begin the independent practice of dentistry, including skills, understanding, and professional values, that are performed independently in realistic settings.

(i) "Curriculum" means an organized set or courses or discrete modules of learning which are prerequisite to the award of a certificate, degree or diploma.

(j) "Educational outcomes" mean intended results of a process on those who experience the process, such as new skills for those in educational programs.

(k) "Educational program" means a progressive or planned system of training, instruction or study.

(l) "Examining Committee" means the Examining Committee appointed by the board.

(m) "Faculty member" or "qualified faculty" means a person who satisfies both of the following:
The person possesses either:

(A) A credential generally recognized in the field of instruction; or

(B) A degree, professional license, or credential at least equivalent to the level of instruction being taught or evaluated.

(2) The person has entered into an agreement with the institution whereby the person is obliged to conduct one or more of the courses in the institution's curriculum, advise and consult with individuals students, or facilitate and evaluate student learning outcomes and progress.

(n) "Goal" means an intention or expectation that requires several tasks to produce the desired result, and generally involved the accomplishment of two or more objectives.

(o) "Institution" means any school, either within the United States or outside the United States, that offers a program leading to a degree in dentistry.

(p) "Licentiate" means any individual or corporation licensed or registered by the board.

(q) The masculine gender includes the feminine, and the feminine, the masculine.

(r) "Mission/purpose" means an institutions' stated educational reasons to exist. The mission/purpose shall have all of the following characteristics:

(1) It shall include the institution's broad expectations concerning the education which students will receive, including the acquisition of the body of knowledge presented in the educational program, the development of intellectual, analytical, and critical abilities, and the

fostering of values such as a commitment to pursue lifeline learning;

(2) It shall related to the educational expectations of the institution's students and faculty and the community, which the institution serves.

(s) "Objectives" mean statements of the intended actions or results of a program and are either measurable or specific enough so that qualified individuals would agree on whether they have been met.

(t) "Outcomes assessment" means a profile of measures evaluating the effectiveness of programs in meeting their goals as reflected in tangible results such as student test scores.

(u) "Quarter" means at least 10 weeks of instruction.

(v) "Quarter unit" means at least ten (10) hours of college or university level instruction during a quarter plus a reasonable period of time outside of instruction which an institution requires a student to devote to preparation for planned learning experiences, such as preparation for instruction, study of course materials, or completion of education projects.

(w) "Semester" means at least 15 weeks of instruction.

(x) "Semester unit" means at least fifteen (15) hours of college or university level instruction during a semester plus a reasonable period of time outside of instruction which an institution requires a student to devote to preparation for planned learning experiences, such as preparation for instruction, study of course materials, or completion of education projects.

(y) "Staff" means professional, technical, or clerical employees funded by the educational institution to support is educational program.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1611 and 1614, Business and Professions Code.

1001. Delegation to Board's Executive Officer.

(a) It shall be the duty of the Board's executive officer to plan, direct and organize the work of the staff; attend Board meetings and hearings; consult with and make recommendations to the Board; dictate correspondence; attend committee meetings of various organizations and associations; assist in compiling examination material; attend examinations and assist in conducting the examinations; notify applicants of their success or failure on examinations; and prepare reports and direct and supervise the field investigators concerning enforcement of the Act.

(b) The power and discretion conferred by law upon the board to initiate, review and prosecute

accusations and statements of issues pursuant to Sections 11500 through 11528 of the Government Code are hereby delegated to and conferred upon the board's executive officer or in the absence thereof, the assistant executive officer.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1670, Business and Professions Code; and Sections 11500-11528, Government Code.

1002. Rules of Order.

The most recent edition of Robert's Rules of Order shall be used for all meetings to the extent such rules are not in conflict with law.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614, Business and Professions Code.

1003. Posting of Notice -- Experimental Dental Health Programs.

Prior to the undertaking of any dental health experimental program utilizing members of the public as patients, a notice approved by the board that is written in English, as well as a second language if warranted by the needs of the local community, shall be posted in a conspicuous and publicly accessible area within the treatment facility and shall be maintained in such area for the life of the program. Such a notice shall clearly state the nature and intent of said experimental dental health program.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614, Business and Professions Code; and Section 429.77, Health and Safety Code.

1004. Abandonment of Applications.

(a) An application shall be deemed to have been abandoned in any of the following circumstances:

(1) The applicant fails to submit the application, examination, or reexamination fee within 180 days after notification by the board that such fee is due and unpaid.

(2) The applicant fails to take the licensing examination within two years after the date his application was received by the board.

(3) The applicant, after failing the examination, fails to take a reexamination within two years after the date applicant was notified of such failure.

(b) An application submitted subsequent to the abandonment of a former application shall be treated as a new application.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614, Business and Professions Code.

1005. Minimum Standards for Infection Control.

(a) As used in this section:

(1) "Universal precautions" is an approach to

infection control according to which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other blood-borne pathogens.

(2) "Critical instruments" are surgical and other instruments used to penetrate soft tissue or bone.

(3) "Semi-critical instruments" are surgical and other instruments that are not used to penetrate soft tissue or bone, but contact oral tissue.

(4) "Non-critical instruments and devices" are instruments and devices that contact intact skin.

(5) "Low-level disinfection" is the least effective disinfection process. It does not kill bacterial spores or mycobacterium tuberculosis var bovis, a laboratory test organism used to classify the strength of disinfectant chemicals.

(6) "Intermediate-level disinfection" kills mycobacterium tuberculosis var bovis that indicates less resistant organisms such as hepatitis B and HIV are also killed.

(7) "High-level disinfection" kills some, but not necessarily all bacterial spores. This process kills mycobacterium tuberculosis var bovis, and other bacteria, fungi and viruses.

(b) Licensees with one or more employees shall comply with infection control precautions mandated by the California Occupational Safety and Health Administration. All licensees shall comply with the following minimum precautions to minimize the transmission of pathogens in health care settings:

(1) Universal precautions shall be practiced in the care of all patients.

(2) Medical exam gloves shall be worn whenever there is potential for contact with blood, blood-contaminated saliva, or mucous membranes. Sterile gloves shall be worn in connection with surgical procedures involving soft tissue or bone. Sterile coolants/irrigants shall be used for surgical procedures involving soft tissue or bone. Sterile coolant/irrigants are deemed to be sterile when delivered using a device or process that has a Food and Drug Administration (FDA) marketing clearance for delivery of sterile coolant/ irrigants to the patient. Delivery of sterile coolant/ irrigants shall be in accordance with the manufacturer's directions.

(3) Health care workers shall wash hands and put on new gloves before treating each patient. Antimicrobial soap shall be used to wash hands for surgical procedures. Health care workers shall wash hands after removing and discarding gloves after treatment of each patient or before leaving the operatory. Gloves shall not be washed before or after use.

(4) Health care workers shall wear surgical face masks and either chin length plastic face shields or surgical masks and protective eyewear

when treating patients. After each patient, and during patient treatment if applicable, masks shall be changed if moist or contaminated. After each patient, face shields and protective eyewear shall be cleaned and disinfected, if contaminated.

(5) Health care workers shall wear reusable or disposable gowns when their clothing is likely to be soiled with blood or other bodily fluids.

(6) Protective attire must be removed when leaving the laboratories and work areas.

(7) Items or surfaces such as, but not limited to, light handles which are impossible to clean and disinfect, shall be protected with impervious barriers. Between patients, the covering must be removed, discarded and replaced with clean covering.

(8) Splash shields shall be used in dental laboratories.

(9) Health care workers who have exudative lesions or weeping dermatitis shall refrain from all direct patient care and from handling patient care equipment until the condition resolves.

(10) Needles shall be recapped only by using the scoop technique or a mechanical device designed for holding the needle sheath, or a mechanical device which eliminates the need for two handed capping. Needles shall not be bent or broken prior to disposal. Disposable needles, syringes, scalpel blades and/or other sharp items and instruments shall be placed into puncture resistant containers for disposal.

(11) Heat stable critical and semi-critical instruments shall be cleaned and sterilized before use by using steam under pressure (autoclaving), dry heat, or chemical vapor. Cal/EPA¹-registered sterilants/disinfectants shall be used for sterilization of heat-sensitive critical items and for high-level disinfection of heat-sensitive semi-critical items.

(12) Heavy-duty utility gloves shall be worn to process instruments before sterilization or high-level disinfection.

(13) Critical and semi-critical instruments shall be packaged before sterilization if they are not to be used immediately and remain sealed until used.

(14) Proper functioning of the sterilization cycle shall be verified at least weekly through use of a biological indicator (such as spore test).

(15) Counter tops and dental unit surfaces shall be cleaned with disposable towels followed by an Cal/EPA¹ intermediate-level disinfectant between patients. Cal/EPA¹ low-level disinfectants shall be used for visibly soiled areas such as floors, walls and other housekeeping surfaces.

(16) Intraoral items such as impressions, bite registrations, prosthetic and orthodontic appliances shall be cleaned and disinfected with an

intermediate-level disinfectant before manipulation in the laboratory and before placement in the patient's mouth.

(17) All high-speed dental handpieces, low-speed handpiece components used intraorally, and other dental unit attachments such as reusable air/water syringe tips and ultrasonic scaler tips shall be heat-sterilized between uses.

(18) Anti-retraction devices in dental unit water lines shall be installed and maintained.

(19) The dental unit line shall be flushed between each patient.

(20) Single-use disposable instruments (e.g. prophylaxis, angles, prophylaxis cups and brushes, tips for high-speed evacuators, saliva ejectors, air/water syringe tips) shall be used for one patient only and discarded appropriately.

(21) At the beginning of each workday, dental unit lines shall be purged with air or flushed with water for at least two (2) minutes prior to attaching handpieces, scalers and other devices.

(22) Contaminated solid waste shall be disposed of according to applicable local, state and federal environmental standards.

(23) A written protocol shall be developed for proper instrument processing, operatory cleanliness, and management of injuries. A copy of this regulation shall be conspicuously posted in each dental office.

(c) The Board shall review this regulation annually.

NOTE: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1680, Business and Professions Code.

¹Cal/EPA contacts: WEBSITE www.cdpr.ca.gov or Main Information Center (916) 324-0419.

Article 3. Issuance of Substitute Licenses

1012. Lost, Destroyed or Mutilated Licenses.

A licensee shall be issued a substitute license upon request therefor. Such request shall be accompanied by an affidavit or declaration containing satisfactory evidence of the loss or destruction of his license certificate. A licensed dentist shall also submit fingerprints on forms provided by the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614, Business and Professions Code.

1013. Change of Name.

Whenever a licentiate requests a change in the name under which he is licensed or presents an order of a court of competent jurisdiction to change his name, the board shall, upon surrender of the

original license of said licentiate, issue a substitute license setting forth the name of said licentiate as changed. There shall also be set forth on the substitute license the number of the original license and the name in which it was issued.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1611 and 1614, Business and Professions Code.

Article 3.1 Radiation Safety Courses

1014. Approval of Radiation Safety Courses.

(a) A radiation safety course is one which has as its primary purpose providing theory and clinical application in radiographic techniques. A single standard of care shall be maintained and the board shall approve only those courses which continuously maintain a high quality standard of instruction.

(b) A radiation safety course applying for approval shall submit to the board an application and other required documents and information on forms prescribed by the board. The board may approve or deny approval of any such course. Approval may be granted after an on-site evaluation of all components of the course has been performed and the report of such evaluation indicates that the course meets the board's requirements. The board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the board and adopt those findings as its own.

(c) The board may withdraw its approval of a course at any time, after giving the course provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond. Approval may be withdrawn for failure to comply with the board's standards or for fraud, misrepresentation or violation of any applicable federal or state laws relating to the operation of radiographic equipment.

(d) The processing times for radiation safety course approval are set forth in Section 1061.

Note Authority cited: Sections 1614 and 1656, Business and Professions Code. Reference: Section 1656 Business and Professions Code; and Section 15376, Government Code.

1014.1. Requirements for Radiation Safety Courses.

A radiation safety course shall comply with the requirements set forth below in order to secure and maintain approval by the board. The course of instruction in radiation safety and radiography techniques offered by a school or program approved by the board for instruction in dentistry, dental hygiene or dental assisting shall be deemed to be an approved radiation safety course if the

school or program has submitted evidence satisfactory to the board that it meets all the requirements set forth below.

(a) Educational Level. The course shall be established at the postsecondary educational level or a level deemed equivalent thereto by the board.

(b) Program Director. The program director, who may also be an instructor, shall actively participate in and be responsible for at least all of the following:

(1) Providing daily guidance of didactic, laboratory and clinical assignments;

(2) Maintaining all necessary records, including but not limited to the following:

(A) Copies of current curriculum, course outline and objectives;

(B) Faculty credentials;

(C) Individual student records.

(3) Issuing certificates to each student who has successfully completed the course and maintaining a record of each certificate for at least five years from the date of its issuance;

(4) Transmitting to the board on a form prescribed by the board the name, address and, where applicable, license number of each student who has successfully completed the course;

(5) Informing the board of any significant revisions to the curriculum or course outlines.

(c) Faculty. The faculty shall be adequate in number, qualifications and composition and shall be suitably qualified through academic preparation, professional expertise, and/or appropriate training, as provided herein. Each faculty member shall possess the following qualifications:

(1) Hold a valid special permit or valid license as a dentist, registered dental hygienist or registered dental assistant issued by the board;

(2) Have background in and current knowledge of dental radiography techniques;

(3) Shall have either passed the radiation safety examination administered by the board or equivalent licensing examination as a dentist or dental hygienist or, on or after January 1, 1985, shall have successfully completed a board approved radiation safety course.

(d) Facilities. There shall be a sufficient number of safe, adequate, and educationally conducive lecture classrooms, radiography operatories, darkrooms, and viewing spaces for mounting, viewing and evaluating radiographs. Adequate sterilizing facilities shall be provided.

(1) A radiographic operatory shall be deemed adequate if it fully complies with the California Radiation Control Regulations (Title 17, Cal. Code Regs., commencing with section 30100), is properly equipped with supplies and equipment for practical work and includes for every seven

students at least one functioning radiography machine which is adequately filtered and collimated in compliance with Department of Health Services regulations and which is equipped with the appropriate position-indicating devices for each technique being taught.

(2) The darkroom shall be deemed adequate if it is of sufficient size, based upon the number of students, to accommodate students' needs in learning processing procedures and is properly equipped with supplies and equipment for practical work.

(3) X-ray areas shall provide protection to patients, students, faculty and observers in full compliance with applicable statutes and regulations.

(e) Didactic Instruction and Demonstration. Sufficient classroom instruction shall be provided in at least the following subjects to provide the educational foundation necessary for the laboratory and clinical phases of the program:

(1) Radiation physics and biology

(2) Radiation protection and safety

(3) Film exposure and processing

(4) Film mounting and viewing

(5) Intraoral techniques and holding devices

(6) Use of cylindrical and rectangular collimation

(7) Supplemental techniques.

Students may be given the opportunity to obtain credit by the use of challenge examinations and other methods of evaluation.

(f) Laboratory Instruction. Sufficient hours of laboratory instruction shall be provided to ensure that a student successfully completes on a manikin at least the procedures set forth below. A procedure has been successfully completed only if each film is of diagnostic quality as defined by the American Association of Dental Schools' 1978 Position Paper on Dental Radiography.

(1) Two full mouth periapical surveys, consisting of at least 18 films each, 4 of which must be bitewings;

(2) Two bitewing surveys, consisting of at least 4 films each;

(3) Developing, processing, and mounting of exposed radiographs;

(4) Student evaluation of radiographs.

(g) Clinical Experience. The course of instruction shall include sufficient clinical experience, as part of an organized program of instruction, to obtain clinical competency in radiographic techniques. Clinical experience shall include a minimum of four full mouth periapical surveys, consisting of at least 18 films each, 4 of which must be bitewings. Such films shall be of diagnostic quality as defined by the American Association of Dental Schools' 1978

Position Paper on Dental Radiography. All exposures made on human subjects shall only be made for diagnostic purposes. All clinical instruction shall be performed under the supervision of a licensed dentist in accordance with sections 25661(h) and 25672(b) of the Health and Safety Code.

There shall be a written contract of affiliation with each clinical facility utilized by a course. Such contract shall describe the settings in which the clinical training will be received and shall provide that the clinical facility has the necessary equipment and accessories appropriate for the procedures to be performed and that such equipment and accessories are in safe operating condition.

(h) Certificates. A certificate shall be issued to each student who successfully completes the course. A student shall be deemed to have successfully completed the course if the student has met all the course requirements and has obtained passing scores on both written and clinical examinations.

Note Authority cited: Sections 1614 and 1656, Business and Professions Code. Reference: Section 1656, Business and Professions Code.

Article 4. Continuing Education

1015. Purposes.

The board has determined that the public health and safety will be served by requiring all holders of licenses granted by the board under the Code to continue their education after receiving such licenses.

Note Authority cited: Sections 1614 and 1645, Business and Professions Code. Reference: Section 1645, Business and Professions Code.

1016. Providers and Courses.

(a) Course of Study Defined. "Course of study" means an orderly learning experience in the area of dental and medical health, preventive dental services, diagnosis and treatment planning, clinical procedures, basic health sciences, dental practice administration, or the Dental Practice Act and other laws specifically related to dental practice which is designed to directly enhance the licentiate's knowledge, skill or competence in the provision of service to patients or the community.

(1) Dental practice administration courses are defined as those in the following areas:

(A) pertain to the legal requirements governing the licentiate in the areas of auxiliary employment and delegation of responsibilities; actual delivery of care; OSHA and general safety.

(B) pertain to patient management and

motivation if such management and motivation will improve the health of the patient.

(C) pertain to the improvement of office operations for the patient's benefit and/or to improve the continuity of care provided to the patient.

(2) Examples of acceptable dental practice administration courses include but are not limited to:

(A) courses addressing the evaluation, improvement and/or methods of correction for recall and scheduling systems.

(B) courses addressing comprehensive treatment planning.

(C) courses addressing office instrument sterilization systems.

(D) courses addressing the implementation and/or mechanism of alternative delivery systems.

(E) courses addressing patient record keeping.

(3) Courses considered to be outside the scope of the continuing education program include, but are not limited to, those in the following areas:

(A) money management, the licentiate's personal finances or personal business matters;

(B) basic educational or cultural subjects not related to the practice of dentistry;

(C) general physical fitness or the licentiate's personal health;

(D) presentations by political or public figures or other persons that do not deal primarily with dental practice;

(E) basic skills such as communication, memory training and speed reading;

(F) tort liability;

(G) courses addressing the computerized dental office when the topic involves record management or new technology designed primarily for the licentiate's understanding and benefit;

(H) courses designed to make the licentiate a better business person or designed to improve licentiate or staff motivation;

(I) courses pertaining to the improvement of office operations, licentiate and staff convenience, or profit motive;

(J) courses which address increased office production; financial planning; employee benefits; marketing or motivational topics to increase productivity or profitability;

(K) courses in which the primary beneficiary is the licentiate.

(b) Application and Renewal.

(1) A "registered provider" is one who offers courses of study for credit toward satisfying the continuing education requirements of the board. Application for registration as a provider shall be made on a form prescribed by the board and shall

be accompanied by the fee required by section 1021 and documentation that the provider meets the requirements set forth below.

(2) Every provider's registration expires two years from the date of its issuance. A provider may renew its registration by filing an application for renewal on a form prescribed by the board, accompanied by the fee required by section 1021 and a list of all courses offered during the last renewal period pursuant to its registration, the name and qualifications of each instructor, and a summary of the content of each course of study.

(c) Standards for Registration. Those providers requesting registration shall meet the following criteria:

(1) Each course of study shall be conducted on the same educational standards of scholarship and teaching as that required of a true university discipline and shall be supported by those facilities and educational resources necessary to comply with this requirement. Every instructor shall have education or experience within the last five years in the subject being taught. Each course of study shall clearly state educational objectives that can realistically be accomplished within the framework of the course. Teaching methods for each course of study shall be described (e.g., lecture, seminar, audiovisual, clinical, simulation, etc). Each participant shall be given the opportunity to provide a written evaluation of the quality of the course.

(2) The topic of instruction shall conform to subsection (a) above.

(3) An opportunity to enroll in such courses of study is available to all dental licentiates.

(4) Reference by providers to courses offered for credit toward satisfying the board's continuing education requirements shall be limited to the announcement: "This provider is authorized to confer _____ units of California continuing education credit."

(d) Enforcement and Availability of Records. The board will not give prior approval to individual courses. However, the board will randomly audit courses submitted for credit in addition to any course for which a complaint is received. If an audit is made, course organizers will be asked to submit to the board:

- (1) Faculty curriculum vitae;
- (2) Course content;
- (3) Educational objectives;
- (4) Teaching methods;
- (5) Evidence of evaluation;
- (6) Attendance records.

(e) Withdrawal of Registration.

(1) The board retains the right and authority to audit or monitor courses given by any provider. The board may withdraw or place restrictions on a

provider's registration if the provider has disseminated any false or misleading information in connection with the continuing education program, fails to comply with regulations, misrepresents the course offered, makes any false statement on its application or otherwise violates any provision of the Dental Practice Act or the regulations adopted thereunder.

(2) Any provider whose registration is withdrawn or restricted shall be given a hearing before the board prior to the effective date of such action. The provider shall be given at least ten days notice of the grounds for the proposed action and the time and place of such hearing.

(f) Units of Credit for Attendance. One unit of credit shall be granted for every hour of contact instruction. This credit shall apply to either academic or clinical instruction. Eight units shall be the maximum continuing education credits granted in one day.

(g) Provider Responsibility.

(1) It shall be the responsibility of the provider to furnish a written certification to the licentiate certifying that the licentiate has met the attendance requirements of the course. Such certification shall not be issued until completion of the course and shall contain the provider's name, course registration number, dates attended and units earned filled in by the provider. Additionally, space shall be provided for the licentiate's printed name, signature and license number.

(2) When two or more registered providers co-sponsor a course, only one provider number shall be used for that course and that provider must assume full responsibility for compliance with the requirements of this article.

(h) Out of State Course. A licentiate who attends a course or program which meets all requirements for continuing education courses but which was given outside California by an unregistered provider may request continuing education credit by submitting information on course content and duration to the board, furnishing evidence from the provider of the course that the licentiate was in attendance. In the case of a scientific meeting or convention, such evidence shall indicate that the licentiate attended the specific lecture for which credit is requested. When the necessary requirements have been fulfilled, the board may issue a written certification which the licentiate may then use for documentation of continuing education credits.

Note Authority cited: Sections 1614 and 1645, Business and Professions Code. Reference: Section 1645, Business and Professions Code.

1016.1. Processing Times.

The board shall inform an applicant in writing within 30 days whether the application for registration as a provider or for approval of an out of state course is complete and accepted for filing or is deficient and what specific information is required. The Board shall decide within 30 days after the filing of a complete application whether the applicant meets the requirements. The processing times for an application for registration as a provider or approval for an out of state course from receipt of the initial application until a final decision on the application during the two years preceding this proposal were as follows:

Minimum: 9 days

Median: 35 days

Maximum: 90 days

The board shall inform an applicant in writing within 30 days whether the application for renewing a provider's registration is complete and accepted for filing or is deficient and what specific information is required. The Board shall decide within 30 days after the filing of a complete application whether the applicant meets the requirements. The processing times for the application for renewing a provider's registration from receipt of the initial application until a final decision on the application during the two years preceding this proposal were as follows:

Minimum: 1 day

Median: 37 days

Maximum: 74 days

Note: Authority cited: Section 1614, Business and Professions Code; and Section 15347, Government Code. Reference: Sections 15347 et seq; Government Code.

1017. Units Required for Renewal of License.

(a) Effective with the 2004-2005 renewal cycle, and every renewal cycle thereafter, as a condition of renewal, licensees will be required to complete continuing education units in each of the following subjects: (1) infection control and (2) California law. Dentists will be required to complete two units of continuing education in infection control and two units in California law. Dental auxiliaries will be required to complete two units in infection control and two units in California law. The mandatory units will count toward the total units required to renew a license, however, failure to complete the mandatory course will result in non-renewal of a license. The course in infection control shall be consistent with the board regulations on infection control. The course in California law shall include, but not be limited to, instruction on: the scope of practice, requirement for renewal of a license, use of auxiliaries in a dental practice, laws governing the prescribing of drugs, and acts in violation of the

Dental Practice Act.

(b) Every licentiate shall accumulate the continuing education units equal to the number of units indicated below during the biennial license renewal period and shall assure the board that he/she will accumulate such units during the succeeding two year renewal period; except that those new licentiates who have been issued a license to practice for a period less than 2 years shall commence accumulating continuing education credits with the next biennial renewal period occurring after the issuance of a license to practice. As part of the continuing education requirements, each licentiate shall complete, at least once every two years, a course in basic life support approved by the American Red Cross or the American Heart Association. Each licentiate who holds a general anesthesia permit shall take and complete, at least once every two years, either (1) an advanced cardiac life support course which is approved by the American Heart Association and which includes an examination on the materials presented in the course or (2) any other advanced cardiac life support course which is identical in all respects, except for the omission of materials that relate solely to hospital emergencies or neonatology, to the course published by the American Heart Association in April 1983, which is incorporated by reference. Each licentiate who holds a conscious sedation permit shall take and complete at least once every two years a minimum of 15 total units of courses related to the administration of conscious sedation and to medical emergencies. Refusal to execute the required assurance shall result in non-renewal of the license.

(1) Dentists: 50 units.

(2) Registered dental hygienists: 25 units.

(3) Registered dental assistants: 25 units.

(4) Registered dental hygienists in extended functions: 25 units.

(5) Registered dental assistants in extended functions: 25 units.

(6) Registered dental hygienists in alternative practice: 35 units.

(c) Notwithstanding any other provision of this code, tape recorded courses and correspondence courses approved by the board shall be accepted for credit up to, but not exceeding, half of the total required credit. Interactive instruction courses via computers, telephone conferencing, video conferencing, or other electronic mediums approved by the board shall be accepted for full credit.

(d) The license of any person who fails to accumulate the continuing education units set forth in (a) and (b), or to assure the board that he/she

will accumulate such units, shall not be renewed until such time as the licensee complies with those requirements.

(e) A licensee who has not practiced in California for more than one year because the licensee is disabled need not comply with the continuing education requirements of this article during the renewal period within which such disability falls. Such licensee shall certify that he/she is eligible for waiver of the continuing education requirements. A licensee who ceases to be eligible for such waiver shall comply with the continuing education requirements for subsequent renewal periods.

(f) A licensee who applies for license renewal shall, on a form provided by the board, provide a summary of continuing education units earned during the license renewal period. The licensee shall retain for a period of four years the certifications issued to him/her at the time he/she attended the course and shall forward such certifications to the board only upon request by the board. A licensee who fails to retain a certification shall contact the provider and obtain a duplicate certification. Providers may issue duplicate certifications only to licensees whose names appear on the provider's roster of course attendees. The certification shall be clearly marked "duplicate" and shall contain the licensee's name, as well as the provider's name, course registration number, dates attended, and units earned. Any licensee who furnishes false or misleading information to the board regarding his continuing education units shall be subject to disciplinary action. The board will audit such licensee records as it deems necessary to assure that the continuing education requirements are met.

Note Authority cited: Sections 1614 and 1645, Business and Professions Code. Reference: Sections 1645, 1646.5 and 1647.5, Business and Professions Code.

History: Amendment of subsection (a) filed 4-8-2003; operative 5-8-2003.

1017.1. Processing Times.

The board shall inform an applicant for the renewal of a license in writing within 30 days whether the application is complete and accepted for filing or is deficient and what specific information is required. The board shall decide within 30 days after the filing of a completed application whether the applicant meets the requirements. The processing times for an application for the renewal of a license from the receipt of the initial application until a final decision on the application during the two years preceding this proposal were as follows:

Minimum: 7 days

Median: 43 days

Maximum: 139 days

Note: Authority cited: Section 1614, Business and Professions Code; and Section 15376, Government Code. Reference: Sections 15347 et seq., Government Code.

1017.2. Inactive Licenses.

(a) A licensee who desires an inactive license shall submit an application to the board on a form provided by the board.

(b) In order to restore an inactive license to active status, the licensee shall submit an application to the board on a form provided by the board, accompanied by evidence that the licensee has completed the required number of hours of approved continuing education in compliance with this article within the last two years preceding such application.

(c) The holder of an inactive license shall continue to pay to the board the required biennial renewal fee.

(d) The board shall inform an applicant who wishes to activate/inactivate his/her license in writing with 30 days whether the application is complete and accepted for filing or is deficient and what specific information is required. The board shall decide within 30 days after the filing of a completed application whether the applicant meets the requirements.

Note Authority cited: Section 1614, Business and Professions Code; and Section 15376, Government Code. Reference: Sections 700-704, Business and Professions Code; and Sections 15347 et seq., Government Code.

Article 4.5 Disciplinary Guidelines

1018. Disciplinary Guidelines.

In reaching a decision on a disciplinary action under the Administrative Procedures Act (Government Code Section 11400 et seq.), the Board of Dental Examiners shall consider the disciplinary guidelines entitled "Board of Dental Examiners Disciplinary Guidelines With Model Language", revised 11/8/96 which are hereby incorporated by reference. Deviation from these guidelines and orders, including the standard terms of probation, is appropriate where the Board of Dental Examiners in its sole discretion determines that the facts of the particular case warrant such deviation - for example: the presence of mitigating factors; the age of the case; evidentiary problems.

Note: Authority cited: Section 1614, Business and Professions Code and Sections 11400.20 and 11400.21, Government Code., Reference : Section 11400.20 and 11425.50(e), Government Code.

Article 5. Criteria for Evaluation Rehabilitation/Substantial Relationship

1018.1 Criteria for Appointment as Agent of the Board.

(a) For purposes of this article, an Agent of the Board is a licensed dental professional or other licensed health care professional, whom the Board has authorized to perform delegable duties or functions. The Board may appoint an Agent to serve in one or more of the following capacities:

- (1) Conduct on-site valuations to assess the competency of the general anesthesia and conscious sedation permit holders;
- (2) Aid in the administration of examinations to determine the competency of applicants for licensure;
- (3) Review written statements, dental records, radiographs and other documents to evaluate quality of care delivered by licensees and are the subject of complaints received by the Board;
- (4) Serve on the Examination Committee;
- (5) Serve on the Diversion Evaluation Committee;
- (6) Testify in criminal court and administrative hearings as an expert witness;
- (7) Serve on ad hoc committees created by the Board; and or
- (8) Perform any other function which the Board is authorized to delegate to an Agent.

(b) An Agent shall:

- (1) Hold a valid and current license in good standing issued by the Board or, if necessary to perform the functions delegated, by another healing arts board under the Department of Consumer Affairs;
 - (2) Not be the subject of an on going occupational or professional investigation, unresolved complaint, or pending disciplinary action;
 - (3) Not hold a license which is currently on probation, or which has been on probation within two years prior to appointment by the Board.
- (c) The Board may temporarily remove the delegation of authority to an Agent, or may remove an Agent directly from his or her appointment or acts which include but are not limited to:
- (1) Be the subject of an ongoing investigation, or unresolved complaint, or a pending disciplinary action;
 - (2) Have his or her professional license placed on probation by the Board or other licensing agency;
 - (3) Allow his or her license to become delinquent or be cancelled;

(4) Be convicted of a crime substantially related to the practice of dentistry;

(5) Perform his/her Board-delegated functions in a negligent, incompetent or dishonorable manner.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 10 and 1614, Business and Professions Code.

1019. Substantial Relationship Criteria.

For the purposes of denial, suspension or revocation of a license of a dentist or a dental auxiliary pursuant to Division 1.5 (commencing with Section 475) of the Code, a crime or act shall be considered to be substantially related to the qualifications, functions, or duties of a dentist or dental auxiliary if to a substantial degree it evidences present or potential unfitness of a licensee to perform the functions authorized by his license in a manner consistent with the public health, safety, or welfare. Such crimes or acts shall include but not be limited to, those involving the following:

(a) Any violation of Article 6, Chapter 1, Division 2 of the Code except Sections 651.4, 654 or 655.

(b) Any violation of the provisions of Chapter 4, Division 2 of the Code.

Note Authority cited: Sections 481 and 1614, Business and Professions Code. Reference: Section 481, Business and Professions Code.

1020. Criteria for Evaluating Rehabilitation.

(a) When considering the denial of a license under Section 480 of the Code, the board in evaluating the rehabilitation of the applicant and his present eligibility for a license, will consider the following criteria:

(1) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.

(2) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480 of the Code.

(3) The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (1) or (2).

(4) The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.

(5) Evidence, if any, of rehabilitation submitted by the applicant.

(b) When considering the suspension or revocation of a license on the grounds of conviction of a crime, the board, in evaluating the rehabilitation of such person and his present eligibility for a license will consider the following

criteria:

- (1) The nature and severity of the act(s) or offense(s);
 - (2) Total criminal record;
 - (3) The time that has elapsed since commission of the act(s) or offense(s);
 - (4) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the licensee;
 - (5) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code;
 - (6) Evidence, if any of rehabilitation submitted by the licensee.
- (c) When considering a petition for reinstatement of a license, the board shall evaluate evidence of rehabilitation, considering those criteria of rehabilitation listed in subsection (b).

Note Authority cited: Sections 482 and 1614, Business and Professions Code. Reference: Section 482, Business and Professions Code.

Article 5.5 Impaired Licentiate Program

1020.1. Criteria for Admission.

An applicant shall meet the following criteria for admission to the Impaired Licentiate Program.

- (a) Is a California licensed dentist or dental auxiliary.
 - (b) Resides in California.
 - (c) Is found to abuse narcotics, dangerous drugs or alcohol in a manner which may affect the licentiate's ability to practice safely or competently.
 - (d) Has voluntarily requested admission to the program.
 - (e) Agrees to undertake any medical and/or psychiatric examinations ordered to evaluate the application for participation in the program.
 - (f) Cooperates with the program by providing medical information, disclosure authorizations and releases of liability as may be necessary for participation in the program.
 - (g) Agrees in writing to cooperate and comply with all elements of the treatment program designed by a diversion evaluation committee and to bear all the costs of such program.
 - (h) Has not been convicted of a crime involving the sale of narcotics or dangerous drugs.
- Note Authority cited: Sections 1614 and 1695.5, Business and Professions Code. Reference: Sections 1695.5 and 1697, Business and Professions Code.

1020.2. Causes for Denial of Admission.

A diversion evaluation committee may deny an applicant admission to the program for any of the

following reasons:

- (a) The applicant does not meet the requirements set forth in Section 1020.1.
- (b) The committee determines that the applicant will not substantially benefit from participation in the program or that the applicant's participation in the program creates too great a risk to the public health, safety or welfare.

Note Authority cited: Sections 1614 and 1695.5, Business and Professions Code. Reference: Section 1695.5, Business and Professions Code.

1020.3. Termination from the Program.

(a) A diversion evaluation committee may terminate a licentiate's participation in the program for any of the following reasons:

(1) The licentiate has successfully completed the treatment program prescribed by the committee.

(2) The committee votes to terminate participation for one of the following causes:

(A) The licentiate has failed to comply with the treatment program designated by the committee.

(B) The licentiate has failed to comply with any of the requirements set forth in Section 1020.1.

(C) Any cause for denial of an applicant set forth in Section 1020.2.

(D) The committee determines that the licentiate has not substantially benefited from participation in the program or that the licentiate's continued participation in the program creates too great a risk to the public health, safety or welfare.

(b) The committee shall determine, based upon the recommendation of both the program manager and a consultant, whether to terminate participation in the program. The committee's decision on termination shall be final.

Note Authority cited: Sections 1614 and 1695.5, Business and Professions Code. Reference: Sections 1695.5 and 1697, Business and Professions Code.

1020.4. Diversion Evaluation Committee Membership.

(a) A diversion evaluation committee shall consist of six members: three licensed dentists, one licensed dental auxiliary, one public member, and one licensed physician or psychologist.

(b) Each committee member shall have experience or knowledge in the evaluation or management of persons who are impaired due to alcohol or drug abuse.

(c) Each member of the committee shall be appointed by the board and shall serve at the board's pleasure. Members of a committee shall be appointed for a term of four years, and each member shall hold office until the appointment and

qualification of his or her successor or until one year shall have elapsed since the expiration of the term for which he or she was appointed, whichever first occurs. No person shall serve as a member of the committee for more than two terms.

Note Authority cited: Sections 1614 and 1695.2, Business and Professions Code. Reference: Section 1695.2, Business and Professions Code.

1020.5. Diversion Evaluation Committee Duties and Responsibilities.

A diversion evaluation committee shall have the following duties and responsibilities in addition to those set forth in Section 1695.6 of the Code:

(a) To consider recommendations of the program manager and any consultant to the committee;

(b) To set forth in writing for each licensee in a program a treatment and rehabilitation program established for that licensee with the requirements for supervision and surveillance.

Note Authority cited: Sections 1614 and 1695.6, Business and Professions Code. Reference: Section 1695.6, Business and Professions Code.

1020.6. Committee Consultants.

A Diversion Evaluation Committee (DEC) may utilize one or more chemical dependency treatment service providers or licensed physicians or psychologists who are competent in their field or specialty and who have demonstrated expertise in the diagnosis and treatment of substance abuse.

Note Authority cited: Sections 1614 and 1695.4, Business and Professions Code. Reference: Sections 1695.4 and 1695.6, Business and Professions Code.

1020.7. Procedure for Review of Applicants.

(a) A diversion evaluation committee consultant and/or program manager shall interview each applicant who requests admission to the program.

(b) The consultant shall interview the applicants and initiate such clinical assessment as necessary to determine applicant eligibility to participate in the program. The program manager may request such other information, authorizations, and releases necessary for participation in the program.

(c) The program manager and the consultant who interview and assess the applicant shall each make a recommendation to the committee whether the applicant should be admitted to the program.

(d) The committee's decision on admission to the program shall be final.

Note Authority cited: Sections 1614 and 1695.4, Business and Professions Code. Reference: Section 1695.6, Business and Professions Code.

Article 6. Fees

1021. Dentists.

The following fees are fixed for dentist licensure by the board:

(a) Initial application for clinical examination \$100
(b) Initial application for restorative technique examination \$250

(c) Application for reexamination \$ 75

(d) Clinical examination or reexamination \$450

(e) Restorative technique examination or reexamination \$250

(f) Initial license \$365*

(g) Biennial license renewal - The fee for the biennial renewal of a dental license for the licensing periods commencing on or after October 1, 1991, through May 31, 1998, shall be \$240. The fee for the biennial renewal of a dental license, for the licensing periods commencing on or after June 1, 1998, shall be \$365.

(h) Biennial license renewal fee for those qualifying pursuant to Section 1716.1 of the code shall be one half of the renewal fee prescribed by subsection (g) for licensing periods which commence on or after May 1, 1993.

(i) Delinquency fee - license renewal - The delinquency fee for license renewal shall be the amount prescribed by section 163.5 of the code.

(j) Substitute certificate \$ 50

(k) Application for an additional office permit \$100

(l) Biennial renewal of additional office permit \$100

(m) Late change of practice registration \$ 50

(n) Fictitious name permit

The fee prescribed by Section 1724.5 of the Code

(o) Fictitious name renewal \$150

(p) Delinquency fee - fictitious name renewal
The delinquency fee for fictitious name permits shall be one-half of the fictitious name permit renewal fee.

(q) Continuing education registered provider fee \$250

(r) General anesthesia or conscious sedation permit or oral conscious sedation certificate \$200

(s) Oral Conscious Sedation Certificate Renewal \$75

(t) General anesthesia or conscious sedation renewal fee \$200

(u) General anesthesia or conscious sedation on-site inspection and evaluation fee \$250

* Fee pro-rated based on applicant's birthdate.

NOTE: Authority cited: Section 1614, Business and

Professions Code. Reference: Sections 1646.6, 1647.8, 1655, 1718.3, 1724, 1724.5, 1801 and 1803, Business and Professions Code.

{Note: The following regulation section 1022 must be disregarded, as it is superceded by statute, Business and Professions Code Section 1725, which allows the Dental Board to set dental auxiliary fees by resolution rather than by regulation.}

1022. Dental Auxiliaries.

The following fees are fixed for dental auxiliaries licensed by the board:

- (a) Application \$20
- (b) Nonclinical examination or reexamination \$30
- (c) Clinical examination or reexamination \$50
- (d) RDA license renewal \$12

The biennial renewal fee for licensing periods beginning on or after January 1, 1988 shall be \$30.

- (e) RDAEF license renewal \$10

The biennial renewal fee for licensing periods beginning on or after January 1, 1988 shall be \$30.

- (f) RDH license renewal \$24

The biennial renewal fee for licensing periods beginning on or after January 1, 1988 shall be \$30.

- (g) RDHEF license renewal \$10

The biennial renewal fee for licensing periods beginning on or after January 1, 1988 shall be \$30.

- (h) RDA delinquency fee \$ 6

The delinquency fee for licensing periods beginning on or after January 1, 1988 shall be \$15.

- (i) RDAEF delinquency fee \$ 5

The delinquency fee for licensing periods beginning on or after January 1, 1988 shall be \$15.

- (j) RDH delinquency fee \$12

The delinquency fee for licensing periods beginning on or after January 1, 1988 shall be \$15.

- (k) RDHEF delinquency fee \$ 5

The delinquency fee for licensing periods beginning on or after January 1, 1988 shall be \$15.

- (l) Substitute certificate \$25

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1656 and 1725, Business and Professions Code.

Article 7. Citations

1023. Citations.

The executive officer of the board may issue a citation to any person who holds a permit or certificate from the board for a violation of any provision or other law enforced by the board.

Note: Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.1 Citation Format.

Each citation:

- (a) shall be in writing;
- (b) shall describe with particularity the nature of the violation, including specific reference to the provision of law determined to have been violated;
- (c) may contain an assessment of an administrative fine, an order of abatement fixing a reasonable period of time for abatement of the violation, or both an administrative fine and an order of abatement;
- (d) shall inform the cited person that, if he or she desires a hearing to contest the finding of a violation, that hearing shall be requested by written notice to the board within 30 days of the issuance of the citation or assessment;
- (e) shall be served upon the licensee personally or by certified mail.

Note Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.2 Administrative Fines for Citation.

Where citations issued pursuant to Section 125.9 of the code include an assessment of an administrative fine, they shall be classified according to the nature of the violation and shall indicate the classification on the face thereof as follows:

(a) A class "A" violation is a violation which the executive officer has determined involves a person who has violated a statute/regulation, and either:

(1) the violation presents a substantial probability that death or serious physical harm to a patient could result therefrom; or

(2) the person has been issued three class B violations within a 24 month time period immediately preceding the act, serving as the basis for the citation, without regard to whether the actions to enforce the previous citations have become final.

A class "A" violation is subject to an administrative fine in an amount not less than \$1,000 and not exceeding \$2,500 for each violation.

(b) A class "B" violation is a violation which the executive officer has determined involves a person

who has violated a statute/regulation relating to the practice of dentistry which does not present a substantial probability that either death or serious physical harm to a patient will result therefrom.

A class "B" violation is subject to an administrative fine in an amount not less than \$50 and not exceeding \$2,500 for each violation.

Note Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.4 Citation Factors.

In assessing the amount of an administrative fine, the executive officer shall consider the following factors:

(a) The good or bad faith exhibited by the cited person.

(b) The nature and severity of the violation.

(c) Evidence that the violation was willful.

(d) History of violations of the same or similar nature.

(e) The extent to which the cited person has cooperated with the board.

(f) The extent to which the cited person has mitigated or attempted to mitigate any damage or injury caused by his or her violation.

(g) Such other matters as justice may require.

Note Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.5 Contest of Citations.

(a) In addition to requesting a hearing, as provided for in subsection (b)(4) of Section 125.9 of the code, the person cited may, within ten (10) days after service or receipt of the citation, notify the executive officer in writing of his or her request for an informal conference with the executive officer regarding the acts charged in the citation. The time allowed for the request shall begin the first day after the citation has been served or received.

(b) The executive officer shall, within 30 days from receipt of the request, hold an informal conference with the person cited and/or his or her legal counsel or authorized representative. At the conclusion of the informal conference the executive officer may affirm, modify or dismiss the citation, including any administrative fine levied or order of abatement issued. The executive officer shall state in writing the reasons for his or her action and serve or mail, as provided in subsection (b) of section 1023.1, a copy of his or her findings and decision to the person cited within ten days from the date of the informal conference. The decision shall be deemed to be a final order without regard to the citation issued, including the administrative fine levied and the order of

abatement.

(c) The person cited does not waive his or her request for a hearing to contest a citation by requesting an informal conference after which the citation is affirmed by the executive officer. If the citation is dismissed after the informal conference, the request for a hearing on the matter of the citation shall be deemed to be withdrawn. If the citation, including any administrative fine levied or order of abatement, is modified, the citation originally issued shall be considered withdrawn and a new citation issued. If a hearing is requested for the subsequent citation, it shall be requested within 30 days in accordance with subsection (b)(4) of Section 125.9 of the code.

Note Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.6 Failure to Comply with Order.

(a) The time allowed for abatement of a violation shall begin the first day after the order of abatement has been served or received. If a cited person who has been issued an order of abatement is unable to complete the correction within the time set forth in the citation because of conditions beyond his or her control after the exercise of reasonable diligence, the person cited may request an extension of time from the executive officer in which to complete the correction. Such a request shall be in writing and shall be made within the time set forth for abatement.

(b) An order of abatement shall either be personally served or mailed by certified mail, return receipt requested.

(c) When an order of abatement is not contested or if the order is appealed and the person or entity cited does not prevail, failure to abate the violation charged within the time specified in the citation shall constitute a violation and failure to comply with the order of abatement. Failure to timely comply with an order of abatement may result in disciplinary action being taken by the board or other appropriate judicial relief being taken against the person cited.

Note Authority cited: Sections 125.9, 1614, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

1023.7 Unlicensed Practice.

The executive officer may issue a citation, in accordance with Section 148 of the code, against any unlicensed person who is acting in the capacity of a licensee under the jurisdiction of the board and who is not otherwise exempt from licensure. Each citation may contain an assessment of an administrative fine, or an order

of abatement fixing a reasonable period of time for an abatement. Administrative fines shall range from \$50 to \$2,500 for each violation. Any sanction authorized for activity under this section shall be separate from and in addition to any other civil or criminal remedies.

Note Authority cited: Sections 148, 1614, Business and Professions Code. Reference: Section 148, Business and Professions Code.

1023.8 Delegation of Program Duties.

Nothing in this article shall preclude the executive officer from delegating his/her duties and responsibilities under this article to other board staff.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 125.9 and 148, Business and Professions Code.

Chapter 2. Dentists

(This chapter is not provided in this publication, as it does not contain regulations pertaining to auxiliaries.)

Chapter 3. Dental Auxiliaries

Article 1. General Provisions

1067. Definitions.

As used in this subchapter:

(a) "Dental auxiliary" means a person who may perform dental supportive procedures authorized by the provisions of these regulations under the specified supervision of a licensed dentist.

(b) "Dental assistant" means an unlicensed person who may perform basic supportive dental procedures specified by these regulations under the supervision of a licensed dentist.

(c) "Registered dental assistant" or "RDA" means a licensed person who may perform all procedures authorized by the provisions of these regulations and in addition may perform all functions which may be performed by a dental assistant under the designated supervision of a licensed dentist.

(d) "Registered dental hygienist" or "RDH" means a licensed person who may perform all procedures authorized by the provisions of these regulations and in addition may perform all functions which may be performed by a dental assistant and registered dental assistant, under the designated supervision of a licensed dentist.

(e) "Registered dental assistant in extended functions" or "RDAEF" means a person licensed as a registered dental assistant who has completed

post-licensure clinical and didactic training approved by the board and satisfactorily performed on an examination designated by the board for registered dental assistant in extended function applicants.

(f) "Registered dental hygienist in extended functions" or "RDHEF" means a person licensed as a registered dental hygienist who has completed post-licensure clinical and didactic training approved by the board and satisfactorily performed on an examination designated by the board for registered dental hygienist in extended functions applicants.

(g) "Oral prophylaxis" means the preventive dental procedures including complete removal of explorer-detectable calculus, soft deposits, plaque, stains, and the smoothing of unattached tooth surfaces. The objective of this treatment shall be creation of an environment in which hard and soft tissues can be maintained in good health by the patient.

(h) "Coronal polishing" means a procedure limited to the removal of plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with rubber cup or brush and a polishing agent.

(i) "Direct supervision" means supervision of dental procedures based on instructions given by a licensed dentist who must be physically present in the treatment facility during performance of those procedures.

(j) "General supervision" means supervision of dental procedures based on instructions given by a licensed dentist, but not requiring the physical presence of the supervising dentist during the performance of those procedures.

(k) "Satisfactory educational qualification" means theory, laboratory and/or clinical experience approved by the board.

(l) "Basic supportive dental procedures" means fundamental duties or functions which may be performed by an unlicensed dental assistant under the supervision of a licensed dentist because of their technically elementary characteristics, complete reversibility and inability to precipitate potentially hazardous conditions for the patient being treated.

(m) "Root planing" means the process of instrumentation by which the unattached surfaces of the root are made smooth by the removal of calculus and/or cementum.

(n) "Periodontal soft tissue curettage" means the closed removal of tissue lining the periodontal pocket, not involving the reflection of a flap.

(o) "Gingival" means pertaining to the gingivae, the mucous membrane with the supporting fibrous tissue.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1741(d), 1754, 1759, 1760 and 1762, Business and Professions Code.

1068. Posting of Dental Auxiliary Duties.

All dentists utilizing the services of dental auxiliaries shall post a notice in a common area of the office which delineates duties and functions deemed by the board as delegable within stipulated settings and/or circumstances. Such notice shall be readily accessible to all individuals under supervision of the dentist.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1751, 1754, 1757, 1759 and 1762, Business and Professions Code.

Article 2. Educational Programs

1070. Approval of Registered Dental Assistant Educational Programs.

(a) It is the intent of the board to approve only those educational programs for registered dental assisting which continuously maintain a high quality standard of instruction. Initial or continued approval shall be contingent upon compliance with these regulations.

(b) An educational program for registered dental assistants is one which has as its primary purpose providing post-secondary education in registered dental assisting and which encompasses educational training in the settings, foundation and application of all duties, functions and responsibilities assignable under these regulations to registered dental assistants. All approved programs shall include approved courses in coronal polishing and radiation safety pursuant to Sections 1014, 1014.1, and 1086(d)(15), but are not required to offer a course in the removal of excess cement from coronal surfaces of teeth under orthodontic treatment by means of an ultrasonic scaler.

(c) Each program shall apply for approval prior to operation. The board may approve, provisionally approve, or deny approval of any such program. The board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the board and adopt those findings as its own. If a negative evaluation is made, the specific reasons therefore shall be provided to the program by the board in writing within 90 days after such negative evaluation was made.

(d) The processing times for RDA educational program approval are set forth in Section 1069. Each approved program shall be re-evaluated approximately every five years, but is subject to re-evaluation at any time if the board has reason to

believe that the program may have violated these regulations.

(e) Program records shall be subject to inspection by the board at any time.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section-1753, Business and Professions Code.

1070.1 Definitions

As used in Section 1070.2:

(a) "Didactic instruction" means lectures, demonstrations, and other instruction without active participation by students.

(b) "Laboratory or Pre-clinical instruction" means instruction in which students receive supervised experience performing functions using study models, manikins, or other simulation methods.

(c) "Clinical Externship instruction" means instruction in which students receive supervised experience in performing functions in the clinical setting on patients.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections-1753, Business and Professions Code.

1070.2 Requirements for Registered Dental Assistant Educational Programs.

The following minimum criteria shall be met for a registered dental assistant educational program to secure and maintain approval by the Board. Additional requirements may be stipulated when deemed necessary by the Board:

(a) Educational Setting. The program shall be established at the post-secondary educational level, or deemed equivalent thereto by the Board.

(b) Advisory Committee. Programs shall have an advisory committee consisting of an equal number of registered dental assistants and dentists, including at least two registered dental assistants and two dentists, all currently licensed by the Board. The advisory committee shall meet at least once each academic year with the program director, faculty and appropriate institutional personnel to monitor the ongoing quality and performance of the program. Programs that admit students at different phases shall meet at least twice each year.

(c) Administration/Faculty. Adequate provision for the supervision and operation of the program shall be made. The program must be staffed by faculty who are well-qualified in curricular subject matter, dental assisting functions, and educational methodology.

(1) The program director and each faculty member shall possess a valid, active, current license issued by the Board, and shall have a background in and current knowledge of dental assisting and registered dental assisting duties. A

registered dental assistant faculty member shall possess certification in coronal polishing and radiation safety, and shall have been licensed as a registered dental assistant for at least four years.

(2) Effective two years after the effective date of this regulation, each faculty member shall have received a certificate of completion of an COMDA approved course in teaching methodology of at least 60 hours at a post-secondary institution prior to student instruction.

(3) Student contact hour loads must allow the faculty sufficient time for class preparation, student evaluation and counseling, and development of subject content and appropriate evaluation criteria and methods.

(4) The program director must have the education, background, and occupational experience necessary to understand and fulfill the program goals. He or she shall have teaching responsibilities which are less than those of a full-time faculty member. He/she shall actively participate in and be responsible for the day-to-day administration of the program including the following:

(A) Providing daily guidance of didactic, laboratory and clinical assignments.

(B) Maintaining for a period of not less than 5 years:

(1) Copies of curricula, course outlines, objectives, and grading criteria.

(2) Copies of faculty credentials, licenses, and certifications.

(3) Individual student records, including those necessary to establish satisfactory completion of all phases of the program, including clinical externship.

(4) Copies of minutes of all advisory committee meetings.

(C) Informing the Board of any changes to the program content, physical facilities, and/or faculty, at least 30 days prior to such change.

(D) Participating in budget preparation and fiscal administration, curriculum development and coordination, determination of teaching assignments, supervision and evaluation of faculty, establishment of mission criteria and procedures, design and operation of program facilities, and selection of extra-mural facilities and coordination of instruction in such facilities.

(E) Holding periodic faculty meetings to provide for subject matter correlation and curriculum evaluation, and to coordinate activities of full-time, part-time, and volunteer faculty.

(5) The owner and/or school administrator shall be responsible for the compliance of the program director with these regulations.

(d) Financial Resources. Sufficient financial resources to support the program and comply with these regulations shall be available. If the program or school requires approval by the California Department of Education and/or the Bureau for Private Post-secondary and Vocational Education, such approval must be obtained prior to application for Board approval by a new program and must be maintained at all times by approved programs. Failure to maintain such approval shall result in the automatic withdrawal of board approval of the program.

(e) The program shall notify the Board, within 30 days after enrollment, of the names, and expected date of graduation of all students enrolled, and shall notify the Board of the names of program graduates within 30 days of graduation.

(f) Length of Program. The program shall be of sufficient duration for the student to develop minimum competence in performing dental assistant and registered dental assistant duties, but shall in no event be less than 720 clock hours.

(g) Evidence of Completion. A certificate, diploma, or other evidence of completion shall be issued to each student who successfully completes the program. A student shall be deemed to have successfully completed the program if the student has met all program requirements and has obtained passing scores on final written and practical examinations on all dental assistant and registered dental assistant duties.

(h) Facilities and Resources. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in performing dental assistant and registered dental assistant duties. Such facilities shall include safe, adequate and educationally conducive:

(1) Lecture classrooms. Classroom size and equipment shall accommodate the number of students enrolled. Classrooms shall include: chalkboard or whiteboard, projection equipment, sufficient electrical outlets, adequate lighting and ventilation, and chairs and writing space for each student.

(2) Operatories. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every five students at any one time, and shall be of sufficient size to accommodate an operator, a student, an instructor, and a patient at one time.

(A) Each operatory shall replicate a modern dental office containing functional equipment including: a power-operated chair for

treating patients in a supine position; operator and assistant stools; dental units designed for application of current principles of dental assistant and registered dental assistant utilization; air-water syringe; adjustable light; slow-speed and high-speed handpieces; oral evacuation equipment; work surface; view box; hand-washing sink; and all other armamentarium required to instruct dental assistant and registered dental assistant duties.

(B) Each operatory shall contain one training manikin with simulated face and tongue, full dentition, and water retrieval system.

(C) Each operatory must be of sufficient size to accommodate an operator, a student, an instructor, and a patient.

(3) Laboratories. The location and number of general use equipment, such as lathes, model trimmers, and vibrators shall assure that each student has the access necessary to develop minimum competency in performing all dental assistant and registered dental assistant duties. Protective eyewear is required for each piece of equipment. During laboratory procedures, dental rotary equipment are required in the ratio of at least one for every three students, model trimmers in the ratio of at least one for every seven students, and vibrators in the ratio of at least one for every three students.

(4) Library. Provision shall be made for reasonable access to current and diverse dental/medical reference texts, current journals, audio visual materials and other necessary resources. Library holdings shall include: nutrition, oral health education, preventive dentistry, dental materials, anesthesia and pain control, oral anatomy, oral histology, oral physiology, oral pathology, morphology, pharmacology, microbiology, chairside assisting, legal/ethical aspects of dentistry, radiology and radiation safety, sterilization/infection control, laboratory procedures, office emergency procedures, general dentistry, and specialty dentistry including, but not limited to, endodontics, oral and maxillofacial surgery, orthodontics, pediatric dentistry, periodontics, and prosthodontics.

(5) Armamentarium

(A) The number and variety of hand instruments shall be sufficient to instruct students in identifying and exchanging instruments, preparing procedural trays, and assisting in the diagnostic, operative and specialty procedures which are a part of general dentistry.

(B) Each student shall possess a pair of safety goggles for their exclusive use.

(C) One permanently preassembled tray for each procedure shall be provided for reference purposes. In addition, at least one set

of hand instruments per chairside procedure for every two students shall be available during instruction of clinical, pre-clinical, and laboratory procedures.

(D) There shall be at least one functional typodont and bench mount for every two students, or comparable equipment if approved in advance by the Board. Each typodont shall have full dentition and soft gingivae.

(6) Infection Control. The program shall establish written pre-clinical, clinical, and laboratory protocols to ensure adequate asepsis, infection and hazard control, and disposal of hazardous wastes, which shall comply with the board's regulations and other Federal, State, and local requirements. The program shall provide such protocols to all students, faculty, and appropriate staff to assure compliance with such protocols. Adequate space shall be provided for preparing and sterilizing all armamentarium. All reusable armamentarium shall be sterilized, and a non-reusable items disposed of properly.

(7) Emergency Materials/Basic Life Support.

(A) A written policy on managing emergency situations must be made available to all students, faculty, and staff. Emergency materials shall include, but not be limited to, an oxygen tank which is readily available and functional. Medical materials for treating patients with life-threatening conditions must be available for instruction and accessible to the operatories. Facilities which do not treat patients must maintain a working model of a kit of such emergency materials for instructional purposes.

(B) All students, faculty, and staff involved in the direct provision of patient care must be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program must document, monitor, and ensure compliance by such students, faculty, and staff, and keep a record of those who are not required to maintain such certification because they are medically or physically unable to perform such procedures.

(i) Program Content. The organization of the curriculum shall be balanced and flexible, creating opportunities for adjustments to changes in the practice of dentistry and registered dental assisting.

(1) Sufficient time shall be available for all students to obtain laboratory experience to achieve minimum competence in all dental assistant and registered dental assistant duties prior to the performance of procedures on patients.

(2) A detailed course outline shall be provided which clearly states curriculum subject matter and specific instruction hours for each topic in the individual areas of didactic, laboratory, pre-clinical, clinical, and externship instruction.

(3) There shall be no more than 14 students per instructor during laboratory instruction. There shall be no more than 6 students per instructor during pre-clinical and clinical instruction.

(4) Programs that admit students at different phases shall provide students with an orientation which shall include anatomy, tooth numbering, and universal precautions, including instrument sterilization, and which shall be successfully completed prior to participation in any other phase of the program.

(5) General program objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the program shall provide the content necessary for students to make judgments regarding the procedures which dental assistants and registered dental assistants are allowed to perform and to anticipate a dentist's needs during procedures performed in the practice of dentistry. The program shall assure that students who successfully complete the program can perform all dental assistant and registered dental assistant duties with minimum competence.

(6) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written and practical examinations. The program shall establish a standard of performance which states the minimum number of satisfactory performances which are required for each procedure.

(7) Areas of didactic and laboratory demonstration instruction shall include at least the following:

(A) Biomedical - Dental-Medical Emergencies, Basic Life Support, Nutrition and Preventive Dentistry;

(B) Dental Science - Dental Materials, Oral Anatomy and Physiology, Oral Pathology, Pharmacology, Morphology and Microbiology;

(C) Dental Assisting - General and Specialty Dentistry, Chairside Assisting, Legal/Ethical Aspects of Dentistry; Patient Management; Infection Control;

(D) All functions dental assistants and registered dental assistants are allowed to perform by statute or regulation.

(j) Externship Instruction. Students shall, as part of an organized program of instruction, be provided with planned, supervised clinical instruction in performing all dental assistant and registered dental assistant duties.

(1) The program director/coordinator or a dental faculty member shall be responsible for selecting extern clinical sites and evaluating student competence in performing procedures both before and after the clinical assignment.

(2) Objective evaluation criteria shall be used by the program faculty and clinic personnel.

(3) Program faculty shall visit each extramural clinical facility at least once every ten clinical days.

(4) Dentists who intend to provide extramural clinical practices shall be oriented by the program director/coordinator or a dental faculty member prior to the student assignment. Orientation shall include the objectives of the program, the preparation the student has had for the clinical assignment, and a review of procedures and criteria to be used by the dentist in evaluating the student during the assignment.

(5) There shall be a written contract of affiliation with each extramural clinical facility utilized by the program. Such contract shall describe the settings in which the clinical training will be received, affirm that the clinical facility has the necessary equipment and armamentarium appropriate for the procedures to be performed, and affirm that such equipment and armamentarium are in safe operating condition.

(6) The program shall maintain documentation that students completed clinical training in all dental assisting and registered dental assisting functions during the clinical externship phase of the program.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1753, Business and Professions Code.

1071. Approval of RDAEF Educational Programs.

(a) A single standard of care shall be maintained and the board shall approve only those educational programs for dental assisting in extended functions which continuously maintain a high quality standard of instruction. The requirements contained in this article are designed to that end and govern the approval of educational programs for RDAEF's. Continuation of approval will be contingent upon compliance with these requirements.

(b) An educational program for RDAEF's is one which has as its primary purpose providing post-secondary education in extended function dental assisting and which encompasses educational

training in the settings, foundation and application of all duties, functions and responsibilities assignable under these regulations to registered dental assistants in extended functions.

(c) A new educational program for RDAEF's shall apply for approval prior to operation. The Board may approve, provisionally approve, or deny approval of any such program. Provisional approval shall not be granted for a period which exceeds the length of the program and in no event for more than 30 days. When the board provisionally approves a program, it shall state the reasons therefor. Provisional approval shall be limited to those programs which substantially comply with all existing standards for full approval. A program given provisional approval shall immediately notify each student of such status.

The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own. If the Board denies approval of a program, the specific reasons therefor shall be provided to the program by the Board in writing within 90 days after such action.

(d) The processing times for RDAEF educational program approval are set forth in Section 1069.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1756, Business and Professions Code, and Section 15376, Government Code.

1071.1. Requirements for Approval of RDAEF Educational Programs.

The following criteria must be met by a dental assisting educational program in extended functions to secure and maintain approval by the board:

(a) Licensure Requirements for Students -- All students must possess valid, active certificates as registered dental assistants issued by the board in order to be admitted to the program.

(b) Education Setting -- The program shall be established at the postsecondary educational level.

(c) Administration/Clinical Training.--The clinical training shall be given at a dental school or facility which has a written contract of affiliation for such training with a dental school. An extension program of a university shall not be considered a dental school. Such written contract of affiliation shall include a description of the settings in which the clinical training may be received and shall provide for direct supervision of such training by faculty designated by the dental school. An affiliated facility shall not include a private dental office unless such office is a site approved by the Board on recommendation of a dental school. Each RDAEF educational program shall provide clinical

facilities and clinical resources necessary to accomplish training of duties assigned to the RDAEF.

(d) Facilities.

(1) There shall be a sufficient number of safe, modern lecture classroom operatories, X-ray operatories, and laboratories for use by the students.

(2) All students shall have access to modern equipment in order to develop extended functions dental assisting skills.

(3) Adequate sterilizing facilities shall be provided.

(e) Curriculum Organization/Learning Resources.

(1) The organization of the curriculum for RDAEF's shall be flexible, creating opportunities for adjustments to and research of, advances in the practice of registered dental assisting in extended functions.

(2) Students shall have reasonable access to dental/medical reference texts, current journals, audio visual materials and other relevant resources.

(3) Curriculum shall provide students with a basic understanding of extended function dental assisting procedures and an ability to perform procedures with competence and judgment.

(f) Curriculum Content.

(1) Areas of didactic and laboratory instruction shall include at least the following areas and shall be related specifically to extended functions:

(A) Biomedical -- nutrition and preventive dentistry.

(B) Dental science -- materials, oral anatomy and physiology, oral pathology, pharmacology, morphology, microbiology, and histology.

(C) Dental assisting -- general and special dentistry, legal/ethical aspects of dentistry, and patient/dental personnel psychology.

(D) Emergency procedures.

(E) Coronal polishing in pit and fissure sealant procedures.

(2) A student who possesses a valid certificate in coronal polishing need not take any course in coronal polishing in order to complete the program.

(3) Each student shall be provided, as part of an organized program of instruction, with sufficient clinical experience to obtain competency in all functions approved by the board for performance by an RDAEF.

(g) Length of Program. The program shall be not less than 90 hours in length and shall be of sufficient length, as determined by the dental school faculty, to ensure that all students will possess the necessary skills to consistently perform extended functions safely on a patient. The board shall reevaluate the minimum length of

the program one year after the effective date of this rule.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1756, Business and Professions Code.

1072. Approval of RDH Educational Programs.

(a) It is the intent of this board to approve only those educational programs for dental hygienists which continuously maintain a high quality standard of instruction. The requirements contained in this article are designed to that end and govern the approval of educational programs for dental hygienists. Continuation of approval will be contingent upon compliance with these requirements.

(b) An educational program for registered dental hygienists is one which has as its primary purpose providing college level programs leading to an associate or higher degree, which is either affiliated with or conducted by an approved dental school, or which is accredited to offer college level or college parallel programs by the American Dental Association Commission on Dental Accreditation or an equivalent body.

(c) A new educational program for registered dental hygienists in California shall apply for approval prior to operation. The board may approve, provisionally approve, or deny approval to any such program. The board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the board and adopt those findings as its own.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1758, Business and Professions Code.

1072.1. Requirements for RDH Educational Programs.

An educational program for RDHs shall comply with the requirements set forth below in order to secure and maintain approval by the board.

(a) Physical Plant. The physical plant and equipment shall be maintained and replaced in a manner designed to provide students with the most modern or educationally optimal environment.

(b) Library. The library resources of an educational program for dental hygienists shall be broad enough to meet the teaching and research needs of the institution.

(c) Admission.

(1) The minimum basis for admission to an approved educational program for dental hygienists shall be the successful completion of an accredited high school course, or the recognized equivalent, which will permit entrance to an accredited college of liberal arts.

(2) An accredited college of liberal arts shall mean an institution approved by the Association of American Universities or by one of the regional accrediting agencies.

(3) The selection of students for admission to a hygiene educational program shall be based on estimates of their capacity for success in the study of dental hygiene as determined by evaluation of all available and significant information including information regarding background, knowledge, aptitude for and interest in the study and practice of dental hygiene, and the range of subject matter and quality of their scholastic record.

(d) Instruction.

(1) Instruction upon all levels in an educational program for dental hygienists shall be conducted upon the premise that dental hygiene education must meet the test of a true university discipline and shall include lectures, laboratory experiments and exercises and clinical practice under supervision.

(2) The term "university discipline" shall be interpreted as a level of instruction at least equivalent to that level of instruction represented by college courses in the basic sciences commonly offered in approved dental schools.

(e) Standards of Proficiency. Each school shall establish and maintain standards of proficiency and accomplishment of a qualitative nature, emphasizing thoroughness of didactic and laboratory requirements and precision in manual skills. Such standards shall be available to each student, and shall be used to ascertain periodic progress or achievement in the curriculum.

(f) Faculty. An educational program for dental hygienists shall employ an adequate staff of competent full-time faculty members having general education, professional training and teaching experience.

(g) Curriculum.

(1) The organization of the curriculum for dental hygienists shall be flexible, creating opportunities for adjustments to and research of, advances in the practice of dentistry and dental hygiene.

(2) The following factors should be considered in establishing and maintaining a balanced curriculum in the sense that it shall not over-emphasize any level or area of instruction:

(A) Respective contribution to the practice of dental hygiene;

(B) Effectiveness of instruction;

(C) Time necessary for student independent study.

(3) The general content of the curriculum shall include four subject areas: general studies, biomedical sciences, dental sciences and clinical

sciences and practice. It shall also include didactic and laboratory instruction of those registered dental assistant duties specifically delegable by a licensed dentist to a registered dental hygienist. (The following guidelines are not to be interpreted as requiring specific courses in each, but rather as areas of instruction which shall be included in the curriculum):

General Subject Matter

Speech
English
Sociology
Psychology

Dental Sciences

Anesthesia
Dental and Medical
Emergencies
Tooth Morphology
Head, Neck and Oral
Anatomy
Oral Pathology
Oral Embryology and Histology
Dental Materials

Biomedical Sciences

General & Microscopic
Anatomy
Physiology
Microbiology
Pathology
Nutrition
Pharmacology

(Basic sciences necessary as a foundation for the instruction of Biomedical Sciences shall be included in, or be a prerequisite to, the curriculum of approved RDH programs)

Clinical Sciences & Practice

Periodontology
Clinical Dental Hygiene
Legal and Ethical Aspects
of Dentistry
Oral Health Education
Community Dental Health

(4) Content of the curriculum for approved dental hygiene educational programs shall specifically include instruction in:

- (A) periodontal soft tissue curettage;
- (B) administration of local anesthetic agents, infiltration and conductive, limited to the oral cavity;
- (C) administration of nitrous oxide and oxygen when used as an analgesic, utilizing fail-safe type machines containing no other general anesthetic agents; provided, however, that a

graduate of a nonresident program which meets all the requirements of Sections 1072 and 1072.1 except those contained in Section 1072.1(g)(4), shall be deemed to have completed an approved program if such person has successfully completed a board-approved course of instruction in each of the functions described in Section 1072.1(g)(4) which were not taught to clinical proficiency in the nonresident dental hygiene program.

(h) Length of Program. A dental hygienist educational program shall be two academic years, not less than 1,600 clock hours, and lead to a certificate.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1758 and 1759, Business and Professions Code.

1073. Approval of RDHEF Educational Programs.

(a) A single standard of care shall be maintained and the Board shall approve only those educational programs for extended functions in dental hygiene which continuously maintain a high quality standard of instruction. The requirements contained in this article are designed to that end and govern the approval of educational programs for RDHEF's. Continuation of approval will be contingent upon compliance with these requirements.

(b) An educational program for RDHEF's is one which has as its primary purpose providing college level education in extended function dental hygiene and which encompasses educational training in the settings, foundation and application of all duties, functions and responsibilities assignable under these regulations to registered dental hygienists in extended functions.

(c) A new educational program for RDHEF's shall apply for approval prior to operation. The Board may approve, provisionally approve, or deny approval of any such program. Provisional approval shall not be granted for a period which exceeds the length of the program and in no event for more than 30 days. When the Board provisionally approves a program, it shall state the reasons therefor. Provisional approval shall be limited to those programs which substantially comply with all existing standards for full approval. A program given provisional approval shall immediately notify each student of such status. The Board's maximum processing time for an application for an RDHEF Educational Program shall not exceed ten days to notify the applicant in writing that the application is complete and accepted for consideration of the Board or, that the application is deficient and what specific information is required. The Board's maximum time

to approve, provisionally approve, or deny approval of the RDHEF Educational Program shall not exceed 90 days upon the filing of a completed application.

The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own. If the Board denies approval of a program, the specific reasons therefor shall be provided to the program by the Board in writing within 90 days after such action.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1761, Business and Professions Code.

1073.1. Requirements for Approval of RDHEF Educational Programs.

(a) Licensure Requirements for Students. All students must possess valid, active licenses as registered dental hygienists issued by the Board and current CPR certification and must have satisfactorily completed a Board-approved course of instruction in periodontal soft tissue curettage, administration of local anesthesia, and administration of nitrous oxide and oxygen in order to be eligible for admission to the program.

(b) Administration/Clinical Training. The clinical training shall be given at a dental school or facility which has a written contract of affiliation for such training with a dental school. An extension program of a university shall not be considered a dental school. Such written contract of affiliation shall include a description of the settings in which the clinical training may be received and shall provide for direct supervision of such training by faculty designated by the dental school. An affiliated facility shall not include a private dental office unless such office is a site approved by the Board on recommendation of a dental school. Each RDHEF Educational Program shall provide the clinical facilities and clinical resources necessary to accomplish training of duties assigned to the RDHEF.

(c) Facilities.

(1) There shall be lecture classrooms, operatories, X-ray operatories, and laboratories for use by the students.

(2) All students shall have access to modern equipment in order to develop extended function dental hygiene skills.

(3) Adequate sterilizing facilities shall be provided.

(d) Curriculum Organization/Learning Resources.

(1) The organization of the curriculum for RDHEF shall be flexible, creating opportunities for adjustments to and research of advances in the

practice of registered dental hygiene in extended functions.

(2) Students shall have reasonable access to dental/medical reference texts, current journals, audio visual materials and other relevant resources.

(3) Curriculum shall provide students with a basic understanding of extended function dental hygiene procedures and an ability to perform procedures with competence and judgment.

(g) Curriculum Content.

(1) Areas of didactic and laboratory instruction shall include at least the following areas and shall be related specifically to extended functions:

(A) Biomedical sciences: anatomy and physiology; microbiology; oral pathology; periodontology; histology; morphology; and pharmacology.

(B) Dental sciences: anesthesia/analgesia; dental materials; occlusion; and dental morphology.

(C) Emergency procedures.

(2) Students shall be provided, as part of an organized program of instruction, with sufficient clinical experience to attain competence in all functions approved by the Board for performance by an RDHEF.

(D) Instrumentation.

(h) Length of Program. The program shall be not less than 90 hours in length and shall be of sufficient length, as determined by the dental school faculty and approved by the Board to ensure that all students will possess the necessary skills to consistently perform extended functions safely on a patient. The Board shall reevaluate the minimum length of the program one year after the effective date of this rule.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1761, Business and Professions Code.

1073.2 Approval of RDHAP Educational Programs.

(a) The Board shall approve only those educational programs for registered dental hygienists in alternative practice (RDHAPs) which continuously maintain a high quality standard of instruction. The requirements contained in this article are designed to that end and govern the approval of educational programs for RDHAPs. Continuation of approval will be contingent upon compliance with these requirements.

(b) An educational program for RDHAPs is one which has as its primary purpose providing college level education including, but not limited to, dental hygiene technique and theory, which shall include gerontology, medical emergencies, business

administration and practice management as they pertain to RDHAPs. The program shall be given by a college or institution of higher education that is accredited by a national agency recognized by the Council for Higher Education Accreditation.

(c) Any program for RDHAPs shall apply for and receive approval prior to operation. The Board may approve, provisionally approve, or deny approval of any such program. Provisional approval shall not be granted for a period which exceeds the length of the program and in no event for more than 30 days. When the Board provisionally approves a program, it shall state the reasons therefor. Provisional approval shall be limited to those programs which substantially comply with all existing standards for full approval. A program given provisional approval shall immediately notify each student of such status. The Board's maximum processing time for an application for an RDHAP educational program shall not exceed ten days to notify the applicant in writing that the application is complete and accepted for consideration by the Board or, that the application is deficient and what specific information is required. The Board's maximum time to approve, provisionally approve, or deny approval of the RDHAP educational program shall not exceed 90 days upon the filing of a completed application.

The Board may, in lieu of conducting its own investigation, accept the findings of any national agency recognized by the Council for Higher Education Accreditation and adopt those findings as its own. If the Board denies approval of a program, the specific reasons therefor shall be provided by the Board in writing within 90 days after denial.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1768, Business and Professions Code.

History: Amendment of subsections (b) and (c) filed 5-22-2003; operative 6-21-2003.

1073.3. Requirements for Approval of RDHAP Educational Programs.

(a) Requirements of Students: All students must possess a valid, active registered dental hygienist license issued by the Board and hold a current CPR certification in order to be eligible for admission to the program.

(b) Administration. Each program shall provide the resources necessary to accomplish education of RDHAPs as specified in this section.

(c) Facilities and Equipment. Physical facilities and equipment shall be maintained and replaced in a manner designed to provide students with an educationally optimal environment.

(d) Curriculum Organization/Learning Resources.

(1) The organization of the curriculum for

RDHAPs shall be flexible, creating opportunities for adjustments to and research of advances in the practice of registered dental hygiene in alternative practice. In addition each program shall establish and maintain qualitative standards for proficiency and accomplishment.

(2) Students shall have access to dental/medical reference texts, current journals, audiovisual materials and other relevant resources to ensure they achieve and maintain the proficiency standards established by the program.

(e) Curriculum Content. Curriculum must include content designed to prepare the student to assess, plan, implement, and evaluate dental hygiene services as an independent practitioner as specified and in accordance with Business and Professions Code Section 1770. The curriculum content shall include, at least the following:

(1) Dental Hygiene Technique and Theory, including:

(A) Oral pathology;

(B) Pharmacology;

(C) Sociology, psychology, and treatment of special populations, including:

1. Geriatric

2. Medically compromised

3. Developmentally disabled

4. Pediatric

(D) Evaluation of Dental Hygiene status and Dental Hygiene treatment planning;

(E) Medical histories/terminology;

(F) Dental/Medical emergencies.

(G) Apply pit, resin or composite fissure sealants

At least 75% of instructional hours shall be devoted to the subjects specified in this subsection.

(2) Business Administration and Practice Management.

(f) Length of Program. The program shall be not less than 150 hours in length.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1768, Business and Professions Code.

1074. Extramural Facility.

(a) As used in this article "extramural dental facility" means any clinical facility employed by an approved dental hygiene educational program for instruction in dental hygiene which exists outside or beyond the walls, boundaries, or precincts of the primary campus of the approved program and in which dental hygiene services are rendered.

(b) An approved dental hygiene educational program shall register extramural dental facilities with the board. Such registration shall be accompanied by information supplied by the dental

hygiene program pertaining to faculty supervision, scope of treatment to be rendered, name and location of the facility, date operation will commence, discipline of which such instruction is a part, and a brief description of the equipment and facilities available. The foregoing information shall be supplemented with a copy of the agreement between the approved dental hygiene program or parent university, and the affiliated institution establishing the contractual relationship. Any change in the information initially provided to the board shall be communicated to the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1758, Business and Professions Code.

1075. List of Approved Programs.

The board's executive officer shall maintain on file a current listing of educational programs approved by the board for the giving of resident professional instruction for registered dental auxiliaries. The list of approved RDH educational programs may include those educational programs approved for such instruction by a commission or accreditation agency approved by the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1753 and 1758, Business and Professions Code.

Article 3. Application for Licensure

1076. General Application Requirements.

(a) Application for licensure as a registered dental auxiliary shall be made on a form prescribed by the board and shall be accompanied by the following:

- (1) The fees fixed by the board;
- (2) Two classifiable sets of fingerprints on forms provided by the board;
- (3) Where applicable, a record of any previous dental assisting or hygiene practice and verification of license status in another jurisdiction.

(b) Completed applications shall be filed with the board not later than the following number of days prior to the date set for the examination for which application is made;

RDH -- 45 days

RDA -- 60 days

RDAEF -- 45 days

An incomplete application shall be returned to the applicant together with a statement setting forth the reason for returning the application and indicating the amount of money, if any, which will be refunded.

An application shall not be deemed incomplete for failure to establish compliance with educational requirements if the application is accompanied by

a certification from an approved program that the applicant is expected to meet all educational requirements established for the license for which application has been made and if the approved program certifies not less than 30 days prior to examination that the applicant has in fact met such educational requirements.

The processing times for dental auxiliary licensure are set forth in Section 1069.(c) Permission to take an examination shall be granted to those applicants who have paid the necessary fees and whose credentials have been approved by the executive officer. Nothing contained herein shall be construed to limit the board's authority to seek from an applicant such other information as may be deemed necessary to evaluate the applicant's qualifications.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1753, 1754, 1758 and 1759, Business and Professions Code; and Section 15376, Government Code.

{Note: Those portions of the following regulation section 1077 that specify an 18-month experience requirement are superceded by law, Section 1753(b) of the Business and Professions Code, which specifies a 12-month experience requirement.}

1077. RDA Applications.

(a) In addition to the requirements set forth in Section 1076, an application for licensure as a registered dental assistant shall be accompanied by the following:

(1) satisfactory evidence that the applicant has been granted a diploma or certificate in dental assisting from an educational program approved by the board; or

(2) satisfactory evidence that the applicant has met the required 18 months satisfactory work experience as a dental assistant. "Satisfactory work experience" means performance of the duties specified in Section 1085(b) and/or (c) in a competent manner as determined by the dentist employer. An applicant shall obtain work experience verification forms from the board and supply such forms to those persons in whose employ the applicant obtained the required work experience. The completed form shall be returned to the board by such person.

(A) The 18 months of experience, which must be gained in California while employed by a California licensed dentist(s), shall be considered qualifying only if the experience was comprised of performing duties specified in Section 1085 (b) and/or (c) during a majority of the experience hours;

(B) The 18 months shall be calculated as

follows:

(1) experience gained while working 20 or more hours per week shall be credited on a weekly basis, with 78 weeks considered equivalent to 18 months;

(2) experience gained while working less than 20 hours per week shall be credited on an hourly basis, with 1,560 hours considered equivalent to 18 months.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1753, Business and Professions Code.

1077.1. RDAEF Applications.

In addition to the requirements, including the processing times, set forth in Section 1076, an application for licensure as an RDAEF shall be accompanied by satisfactory evidence that the applicant has successfully completed an approved RDAEF program.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1758, Business and Professions Code.

1079. RDH Applications.

In addition to the requirements set forth in Section 1076, an application for licensure as a registered dental hygienist shall be accompanied by satisfactory evidence that the applicant has been granted a diploma or certificate in dental hygiene from an approved dental hygiene educational program.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1758, Business and Professions Code.

1079.1. RDHEF Applications.

In addition to the requirements, including the processing times, set forth in Section 1076, an application for licensure as an RDHEF shall be accompanied by satisfactory evidence that the applicant has successfully completed an approved RDHEF program.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 161 and 1758, Business and Professions Code.

1079.2. RDHAP Applications.

In addition to the requirements, including the processing times, set forth in Section 1076, an application for licensure as an RDHAP shall be on a form entitled: License Application for Registered Dental Hygienist in Alternative Practice, (rev.5/99), which is hereby incorporated by reference, and accompanied by satisfactory evidence that the applicant has met either of the following requirements:

(a) Holds a current California RDH license and

meets all of the following requirements:

(1) Has been engaged in clinical practice as a dental hygienist in California for a minimum of 2,000 hours during the immediately preceding 36 months. Up to 1,000 hours in hygiene clinical instruction in a Board-approved dental hygiene program during the immediately preceding 36 months may be applied to the 2,000 hour requirement and;

(2) Has successfully completed a bachelor's degree or its equivalent from a college or institution of higher education that is accredited by a national agency recognized by the Council on Postsecondary Accreditation or the United States Department of Education and;

(3) Has completed an approved RDHAP program.

(b) Has received a letter of acceptance into the employment utilization phase of the Health Manpower Pilot Project No. 155, prior to June 1, 1997.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1768, Business and Professions Code.

1079.3. RDHAP Examination Requirements.

An applicant for licensure as an RDHAP shall complete a written examination as administered by the Board. Such examination shall include, but is not limited to, subjects as defined in Section 1073.3.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1768, Business and Professions Code.

Article 4. Examinations

1080. General Procedures for Dental Auxiliary Written and Practical Examinations.

The following rules, which are in addition to any other examination rules set forth elsewhere in this chapter, are adopted for the uniform conduct of all dental auxiliary written and practical examinations.

(a) The ability of an examinee to read and interpret instructions and examination material is a part of the examination.

(b) No person shall be admitted to an examination room or laboratory unless he or she is wearing the appropriate badge.

(c) An examinee may be dismissed from the entire examination, and a statement of issues may be filed against the examinee, for acts which interfere with the Board's objective of evaluating professional competence. Such acts include, but are not limited to the following:

(1) Allowing another person to take the examination in the place of, and under the identity

of, the examinee.

(2) Copying or otherwise obtaining examination answers from other persons during the course of an examination.

(3) Bringing any notes, books, pictures, tape recorders, or other unauthorized materials into the examination area.

(4) Assisting another examinee during the examination process.

(5) Using the equipment, instruments, or materials belonging to another examinee.

(6) Copying, photographing or in any way reproducing or recording examination questions or answers.

(7) Bringing a previously prepared procedure or any portion thereof into a laboratory examination.

(8) Leaving the assigned examination area without the permission of an exam administrator.

(9) Failing to follow directions relative to the conduct of the examination, including termination of the examination at the scheduled or announced time.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1753, 1756, 1758 and 1761, Business and Professions Code.

1080.1. General Procedures for Dental Auxiliary Clinical Examinations.

The following rules, which are in addition to any other examination rules set forth elsewhere in this chapter, are adopted for the uniform conduct of all dental auxiliary clinical examinations.

(a) Each examinee shall furnish patients, instruments, engines and materials necessary to carry the procedures to completion. The board will provide chairs.

(b) No person shall be admitted to an examination clinic unless he or she is wearing the appropriate identification badge.

(c) An examinee may be dismissed from the entire examination, and a statement of issues may be filed against the examinee, for acts which interfere with the Board's objective of evaluating professional competence. Such acts include, but are not limited to the following:

(1) Allowing another person to take the examination in the place of, and under the identity of, the examinee.

(2) Bringing any notes, books, pictures, tape recorders, or other unauthorized materials into the examination area.

(3) Assisting another examinee during the examination process.

(4) Using the equipment, instruments, or materials belonging to another examinee.

(5) Presenting radiographs which have been altered, or contrived to represent other than the

patient's true condition, whether or not the misleading radiograph was created by the examinee.

(6) Failing to comply with the board's infection control regulations.

(7) Failing to use an aspirating syringe for administering local anesthesia.

(8) Premedicating a patient for purposes of sedation.

(9) Dismissing a patient without the approval and signature of an examiner.

(10) Leaving the assigned examination area without the permission of an exam administrator.

(11) Failing to follow directions relative to the conduct of the examination, including termination of the examination at the scheduled or announced time.

(d) An examinee may be declared by the board to have failed the entire examination for demonstration of gross incompetence in treating a patient.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1753, 1756, 1758 and 1761, Business and Professions Code.

1080.2. Conduct of Dental Auxiliary Examinations.

Examinations shall be anonymous. An anonymous examination is one conducted in accordance with procedures, including but not limited to those set forth below, which ensure and preserve anonymity of applicants.

(a) The board shall randomly assign each applicant a number, and said applicant shall be known by that number throughout the entire examination.

(b) Grading examiners shall not view examinees during the performance of the examination assignments.

(c) There shall be no communications between grading examiners and floor examiners except for oral communications conducted in the presence of board staff. There shall be no communication between grading examiners and examinees except written communications on board approved forms.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1753, 1756, 1758 and 1761, Business and Professions Code.

1080.3. Dental Auxiliary Licensure Examination Review Procedures; Appeals.

(a) An examinee who has failed an examination shall be provided with notice, upon written request, of those areas in which he/she is deficient in the practical or clinical phases of such examination.

(b) An unsuccessful examinee who has been informed of the areas of deficiency in his/her performance on the practical or clinical phases of

the examination and who has determined that one or more of the following errors was made during the course of his/her examination and grading may appeal to the board within sixty (60) days following receipt of his/her examination results:

- (1) Significant procedural error in the examination process;
- (2) Evidence of adverse discrimination;
- (3) Evidence of substantial disadvantage to the examinee.

Such appeal shall be made by means of a written letter specifying the grounds upon which the appeal is based. The Board shall respond to the appeal in writing and may request a personal appearance by the examinee. The Board shall thereafter take such action as it deems appropriate.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1753, 1756, 1758 and 1761, Business and Professions Code.

1081. RDA Examination.

An applicant for licensure as an RDA shall complete a written, task-oriented examination encompassing all duties assignable to RDAs and the settings in which they may be performed. Such examination may also include any or all of the following subjects: Nutrition and preventive dentistry; materials; oral anatomy and physiology; oral pathology; pharmacology; morphology; microbiology; dental assisting procedures in general and special dentistry; principles of business and practice management; legal/ethical aspects of dentistry; patient-dental personnel psychology; four-handed chairside dental assisting; X-ray; sterilization; laboratory and office emergency procedures.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1753, Business and Professions Code.

1081.1. RDA Practical Examination-Requirements.

(a) In addition to the written examination, each applicant for licensure as an RDA shall also take a practical examination consisting of any or all of the procedures listed below. The specific procedures will be assigned by an RDA examination committee appointed by the board. The procedures shall be performed on a full articulated maxillary and mandibular typodont secured with a bench clamp and shall be graded by examiners appointed by the board for that purpose. Each applicant shall furnish the required materials necessary to complete all of the following procedures.

- (1) Placement of a rubber dam;
- (2) Placement of a matrix band for amalgam

preparation;

(3) Placement of a base into a prepared tooth (For purposes of the examination, "prepared tooth" means a tooth from which material has been removed so as to simulate the surgical excision of dental caries);

(4) Placement of a liner into a prepared tooth;

(5) Placement of orthodontic separators;

(6) Placement of a periodontal dressing;

(7) Placement of a temporary sedative dressing into a prepared tooth.

(8) Sizing and placement of a temporary crown.

(9) Temporary cementation of a temporary crown.

(10) Removal of excess cement from supragingival surfaces with a hand instrument or floss.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1753, Business and Professions Code.

1081.2. RDAEF Examination Requirements.

(a) Each applicant for licensure as an RDAEF shall successfully complete an examination on a patient consisting of the procedures set forth below.

(1) Cord retraction of gingivae for impression procedures;

(2) Taking impressions for cast restorations; . The total examination period shall not exceed two and one-half hours.

(b) Each applicant shall provide one patient upon whom the retraction and impression procedures shall be performed. Such patient shall generally meet the criteria of Section 1082.1(b)(1), (2), (4) and (5) of these regulations. The prepared tooth, prior to preparation, must have had mesial and distal contact. The preparation performed shall have margins at or below the free gingival crest and shall be one of the following: 7/8 crown, 3/4 crown, or full crown, including porcelain fused to metal. Alginate impression materials alone are not acceptable.

(c) These procedures shall be graded by examiners appointed by the Board. These procedures may be tested, at the Board's discretion, in a Board-approved dental office or other facilities, by examiners appointed by the Board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1756, Business and Professions Code.

1082. RDH Written Examination.

Each applicant for licensure as an RDH shall successfully complete the National Board of Dental Examiner's examination for dental hygienists and shall submit confirmation thereof to the board in

sufficient time for the board to receive it prior to the date set for the practical examination.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1758, Business and Professions Code.

1082.1. RDH Clinical Examination Requirements.

(a) Every applicant shall be given a clinical examination which shall consist of the examination of a patient, complete scaling of one or two quadrants (depending upon patient selection), and root planing. Scaling and root planing includes but is not limited to the complete removal of calculus, soft deposits and plaque, and smoothing of the unattached tooth surfaces. Unattached tooth surface means the portion of the crown and root surface to which no tissue is attached. Ultrasonic, sonic, handpiece or other mechanical scaling devices may be used only at the direction of the Board. If so permitted, an applicant who chooses to use an ultrasonic or sonic scaling device shall bring to the exam and use the services of an assistant to perform high volume evacuation at all times when the ultrasonic or sonic scaling device is being used. Only the services of a dental assistant or registered dental assistant shall be permitted.

The clinical examination shall be completed within a two hour period. Such period shall commence with the acceptance or rejection of the initial patient presented by the applicant.

(b) One patient shall be provided by the applicant. If a patient is deemed unacceptable by the examiners, it is the applicant's responsibility to provide another patient who is acceptable. The applicant's ability to select an appropriate patient is considered part of the examination. An acceptable patient shall meet the following criteria:

(1) Does not have extreme tissue or tooth sensitivity which would interfere with proper probing and exploring by examiners.

(2) Have at least one quadrant with the following:

(A) At least 6 natural teeth which are free of conditions which would interfere with evaluation, including but not limited to probing depths greater than 6mm, class 3 furcation, class 3 mobility, gross decay, faulty restorations, or full or partial veneer crowns. Crowns with smooth margins are acceptable. A patient will not be rejected because he/she has one tooth with a probing depth greater than 6mm.

(B) At least 3 of the natural teeth in the quadrant must be posterior teeth with interproximal pocket depths of 4 to 6mm. Two of these posterior teeth must be molars.

(C) Demonstrable, explorer-detectable

moderate to heavy subgingival calculus must be present on a majority of the subgingival tooth surfaces and there must be some subgingival calculus on every tooth. Explorer-detectable moderate to heavy interproximal ledges must be present.

(c) If an applicant is unable to find a patient with one quadrant which meets the requirements of subsection (b)(6) above, the applicant may provide a patient in which those requirements can be found in two quadrants. An applicant who presents such a patient shall be required to scale all teeth in both quadrants in the same time allotted for scaling one quadrant.

(d) The applicant shall provide full mouth radiographs of the patient, which shall consist of 18 radiographs at least 4 of which must be bite-wing and the radiographs must be of diagnostic quality. All radiographs shall have been taken not more than one year prior to the examination at which they are presented.

(e) The applicant shall provide the following instruments:

(1) Color coded Marquis-type periodontal probe.

(2) Sharp explorers.

(3) Clear-plane mouth mirror.

(4) Saliva ejector.

(5) All necessary armamentarium for local anesthesia, including an aspirating syringe.

(6) Any other scaling or root planing instruments which he/she intends to use.

(f) The applicant shall offer to the patient the option of the administration of local anesthetic in the area(s) to be scaled, except that anesthesia shall not be administered to both mandibular quadrants of a patient during the same day.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1758, Business and Professions Code. Amendment of subsections (a), (b)(2)(A), (c) and (f) filed 2-6-2003; operative 3-8-2003

1082.2. RDHEF Examination Requirements.

(a) Each applicant for licensure as an RDHEF shall successfully complete an examination on a patient consisting of the procedures set forth below.

(1) Cord retraction of gingivae for impression procedures;

(2) Taking impressions for cast restorations; . The total examination period shall not exceed two and one half hours.

(b) Each applicant shall provide one patient upon whom the retraction and impression procedures shall be performed. Such patient shall generally meet the criteria of Section 1082.1(b)(1), (2), (4) and (5) of these regulations.

The prepared tooth, prior to preparation, must

have had mesial and distal contact. The preparation performed shall have margins at or below the free gingival crest and shall be one of the following: 7/8 crown, 3/4 crown, or full crown, including porcelain fused to metal. Alginate impression materials alone are not acceptable.

(c) These procedures shall be graded by examiners appointed by the Board. These procedures may be tested, at the Board's discretion, in a Board-approved dental office or other facilities, by examiners appointed by the Board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1761, Business and Professions Code.

1083. Passing Grades.

(a) Registered Dental Hygienist. Each applicant for licensure as a registered dental hygienist who attains a grade of 75% in the practical examination designated by the Board shall be considered as having passed the examination.

(b) Registered Dental Assistant. An applicant for licensure as a registered dental assistant shall be deemed to have passed the required examination only if the applicant has obtained a score of at least 75 on the written examination and at least 75% on the practical examination; provided, however, that an applicant who attains a grade of less than 75% in any single procedure shall be considered to have failed the entire practical examination.

(c) Registered Dental Assistant in Extended Functions. Each applicant for licensure as an RDAEF who attains a grade of at least 75% on each procedure in the examination shall be deemed to have passed the required examination.

(d) Registered Dental Hygienist in Extended Functions. Each applicant for licensure as an RDHEF who attains a grade of at least 75% on each procedure in the examination shall be deemed to have passed the required examination. A registered dental hygienist who has passed the RDAEF examination prior to December 31, 1991, shall be eligible for licensure as an RDHEF without further examination.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1606, 1611, 1614, 1634, 1658.1, 1753, 1758 and 1759, Business and Professions Code.

1085. Dental Assistant Duties and Settings.

(a) Unless specifically so provided by regulation, a dental assistant may not perform the following functions or any other activity which represents the practice of dentistry or requires the knowledge, skill and training of a licensed dentist:

- (1) Diagnosis and treatment planning;
- (2) Surgical or cutting procedures on hard or

soft tissue;

(3) Fitting and adjusting of correctional and prosthodontic appliances;

(4) Prescription of medicines;

(5) Placement, condensation, carving or removal of permanent restorations, including final cementation procedures;

(6) Irrigation and medication of canals, try--in cones, reaming, filing or filling of root canals;

(7) Taking of impressions for prosthodontic appliances, bridges or any other structures which may be worn in the mouth;

(8) Administration of injectable and/or general anesthesia;

(9) Oral prophylaxis procedures.

(b) A dental assistant may perform such basic supportive dental procedures as the following under the general supervision of a licensed dentist:

(1) Extra-oral duties or functions specified by the supervising dentist;

(2) Operation of dental radiographic equipment for the purpose of oral radiography if the dental assistant has complied with the requirements of section 1656 of the Code.

(3) Examine orthodontic appliances.

(c) A dental assistant may perform such basic supportive dental procedures as the following under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

(1) Take impressions for diagnostic and opposing models, bleaching trays, temporary crowns and bridges, and sports guards;

(2) Apply non-aerosol and non-caustic topical agents;

(3) Remove post-extraction and periodontal dressings;

(4) Placement of elastic orthodontic separators;

(5) Remove orthodontic separators;

(6) Assist in the administration of nitrous oxide analgesia or sedation; however, a dental assistant shall not start the administration of the gases and shall not adjust the flow of the gases unless instructed to do so by the dentist who shall be present at the patient's chairside at the implementation of these instructions. This regulation shall not be construed to prevent any person from taking appropriate action in the event of a medical emergency.

(7) Hold anterior matrices;

(8) Remove sutures;

(9) Take intra-oral measurements for orthodontic procedures;

- (10) Seat adjusted retainers or headgears, including appropriate instructions;
- (11) Check for loose bands;
- (12) Remove arch wires;
- (13) Remove ligature ties;
- (14) Apply topical fluoride, after scaling and polishing by the supervising dentist or a registered dental hygienist;
- (15) Place and remove rubber dams;
- (16) Place, wedge and remove matrices;
- (17) Cure restorative or orthodontic materials in operative site with light-curing device.

For the purpose of this section a supervising licensed dentist is defined as a dentist whose patient is receiving the services of a dental assistant in the treatment facility and is under the direct control of said licensed dentist.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1751, Business and Professions Code.

1086. RDA Duties and Settings.

(a) Unless specifically so provided by regulation, the prohibitions contained in section 1085 of these regulations apply to registered dental assistants.

(b) A registered dental assistant may perform all functions which may be performed by a dental assistant.

(c) Under general supervision, a registered dental assistant may perform the following duties:

(1) Mouth-mirror inspection of the oral cavity, to include charting of obvious lesions, existing restorations and missing teeth;

(2) Placement and removal of temporary sedative dressings.

(d) A registered dental assistant may perform the following procedures under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

- (1) Obtain endodontic cultures;
- (2) Dry canals, previously opened by the supervising dentist, with absorbent points;
- (3) Test pulp vitality;
- (4) Place bases and liners on sound dentin;
- (5) Remove excess cement from supragingival surfaces of teeth with a hand instrument or floss;
- (6) Size stainless steel crowns, temporary crowns and bands;
- (7) Fabrication of temporary crowns intra-orally;
- (8) Temporary cementation and removal of temporary crowns and removal of orthodontic bands;
- (9) Placement of orthodontic separators;

- (10) Placement and ligation of arch wires;
- (11) Placement of post-extraction and periodontal dressings;
- (12) Apply bleaching agents;
- (13) Activate bleaching agents with non-laser light-curing device;
- (14) Take bite registrations for diagnostic models for case study only;
- (15) Coronal polishing (Evidence of satisfactory completion of a board-approved course of instruction in this function must be submitted to the board prior to any performance thereof). The processing times for coronal polishing course approval are set forth in section 1069. This procedure shall not be intended or interpreted as a complete oral prophylaxis (a procedure which can be performed only by a licensed dentist or registered dental hygienist). A licensed dentist or registered dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material prior to coronal polishing.

(16) Removal of excess cement from coronal surfaces of teeth under orthodontic treatment by means of an ultrasonic scaler. (Evidence of satisfactory completion of a board-approved course of instruction or equivalent instruction in an approved RDA program in this function must be submitted to the board prior to any performance thereof.) The processing times for ultrasonic scaler course approval are set forth in section 1069.

(e) Settings. Registered dental assistants may undertake the duties authorized by this section in a treatment facility under the jurisdiction and control of the supervising licensed dentist, or in an equivalent facility approved by the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1754, Business and Professions Code; and Section 15376, Government Code.

1087. RDAEF Duties and Settings.

(a) Unless specifically so provided by regulation, the prohibitions contained in Section 1085 apply to RDAEFs.

(b) An RDAEF may perform all duties assigned to dental assistants and registered dental assistants.

(c) An RDAEF may perform the procedures set forth below under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

- (1) Cord retraction of gingivae for impression procedures;
- (2) Take impressions for cast restorations;

- (3) Take impressions for space maintainers, orthodontic appliances and occlusal guards.
- (4) Prepare enamel by etching for bonding;
- (5) Formulate indirect patterns for endodontic post and core castings;
- (6) Fit trial endodontic filling points;
- (7) Apply pit and fissure sealants;
- (8) Remove excess cement from subgingival tooth surfaces with a hand instrument;
- (9) Apply etchant for bonding restorative materials.

(d) Settings. Registered dental assistants in extended functions may undertake the duties authorized by this section in a treatment facility under the jurisdiction and control of the supervising licensed dentist, or in an equivalent facility approved by the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1756 and 1757, Business and Professions Code.

{Note: The following regulation section 1088 must be disregarded, as it is superceded by statute, Business and Professions Code Sections 1760 through 1765.}

1088. RDH Duties and Settings.

(a) Unless specifically so provided by regulation, the prohibition contained in Section 1085(a), subsections (1) through (8) of these regulations shall apply to duties performed by a registered dental hygienist.

(b) A registered dental hygienist may perform all duties assigned to dental assistants and registered dental assistants, under the supervision of a licensed dentist as specified in these regulations.

(c) Under general supervision, a registered dental hygienist may perform the following duties in addition to those provided by Section 1760(b) of the Code:

- (1) Root planing;
- (2) Polish and contour restorations;
- (3) Oral exfoliative cytology;
- (4) Apply pit and fissure sealants;
- (5) Preliminary examination, including but not limited to:
 - (A) Periodontal charting;
 - (B) Intra and extra-oral examination of soft tissue;
 - (C) Charting of lesions, existing restorations and missing teeth;
 - (D) Classifying occlusion;
 - (E) Myofunctional evaluation;
- (6) Irrigate sub-gingivally with an antimicrobial and/or antibiotic liquid solution(s).
- (7) The following direct supervision duties of dental assistants and registered dental assistants:

(A) Dental Assistant.

- (1) Taking impressions for diagnostic and opposing models;
- (2) Applying non-aerosol and non-caustic topical agents;
- (3) Removing post-extraction and periodontal dressings;
- (4) Removing sutures;
- (5) Taking intra-oral measurements for orthodontic procedures;
- (6) Checking for loose bands;
- (7) Removing ligature ties;
- (8) Applying topical fluoride;
- (9) Placing elastic separators.

(B) Registered Dental Assistant

- (1) Test pulp vitality;
- (2) Removing excess cement from supragingival surfaces of teeth;
- (3) Sizing stainless steel crowns, temporary crowns and bands;
- (4) Temporary cementation and removal of temporary crowns and removal of orthodontic bands.
- (5) Placing post-extraction and periodontal dressings.

(d) A registered dental hygienist may perform the procedures set forth below under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

(1) Placement of Antimicrobial or Antibiotic Medicaments which do not later have to be removed.

(2) All duties so assigned to a dental assistant or a registered dental assistant, unless otherwise indicated;

(3) Periodontal soft tissue curettage (Evidence of satisfactory completion of a board-approved course of instruction in this function must be submitted to the board prior to any performance thereof);

(4) Administration of local anesthetic agents, infiltration and conductive, limited to the oral cavity (Evidence of satisfactory completion of a board-approved course of instruction in this function must be submitted to the board prior to any performance thereof);

(5) Administration of nitrous oxide and oxygen when used as an analgesic, utilizing fail-safe type machines containing no other general anesthetic agents. (Evidence of satisfactory completion of a board-approved course of instruction in this function must be submitted to the board prior to any performance thereof)

(e) A registered dental hygienist may undertake the duties authorized by this section in the following settings, provided the appropriate supervision requirements are met:

- (1) The treatment facility of a licensed dentist;
- (2) Licensed health facilities as defined in Section 1250 of the Health and Safety Code,
- (3) Licensed clinics as defined in Section 1203 of the Health and Safety Code,
- (4) Licensed community care facilities as defined in Section 1502 of the Health and Safety Code,

(5) Schools of any grade level whether public or private,

(6) Public institutions, including but not limited to federal, state and local penal and correctional facilities.

(7) Mobile units operated by a public or governmental agency or a nonprofit and charitable organization approved by the board; provided, however, that the mobile unit meets the statutory and regulatory requirements for mobile units,

(8) Home of a non-ambulatory patient, provided there is a written note from a physician or registered nurse stating that the patient is unable to visit a dental office.

(9) Health fairs or similar non-profit community activities. Each such fair or activity shall be approved by the board.

Any other facility must be approved by the board.
Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614 and 1759, Business and Professions Code.

1089. RDHEF Duties and Settings.

(a) Unless specifically provided by regulation, the prohibitions contained in Section 1085(a) (1) through (8) shall apply to RDHEFs.

(b) A RDHEF may perform all duties assigned to dental assistants, registered dental assistants and registered dental hygienists.

(c) A RDHEF may perform the procedures set forth below under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

- (1) Cord retraction of gingivae for impression procedures;
- (2) Take impressions for cast restorations;
- (3) Take impressions for space maintainers, orthodontic appliances and guards;
- (4) Prepare enamel by etching for bonding;
- (5) Formulate indirect patterns for endodontic post and core castings;

(6) Fit trial endodontic filling points;

(7) Apply etchant for bonding restorative materials.

(d) Settings. Registered dental hygienists in extended functions may undertake the duties authorized by this section in a treatment facility under the jurisdiction and control of the supervising dentist, or an equivalent facility approved by the board.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1762, Business and Professions Code.

Section 1090. RDHAP Duties and Settings.

(a) Unless specifically so provided by regulation, an RDHAP may not perform the following functions or any activity which represents the practice of dentistry or requires knowledge, skill and training of a licensed dentist:

- (1) Diagnosing and treatment planning;
- (2) Surgical or cutting procedures on hard or soft tissue;
- (3) Fitting and adjusting of correctional and prosthodontic appliances;
- (4) Prescribing medication;
- (5) Placing, condensing, carving or removal of permanent restorations, including final cementation procedures;
- (6) Irrigating and medicating canals, try-in cones, reaming, filing or filling of root canals;
- (7) Taking of impressions for prosthodontic appliances, bridges, or any other devices which may be worn in the mouth;
- (8) Administering local or general anesthesia, oral or parenteral conscious sedation.

(b) Under the supervision of a licensed dentist, an RDHAP may perform the duties assigned to registered dental hygienists by Section 1088, under the same levels of supervision and in the same settings as specified in that section.

(c) Independently and without the supervision of a licensed dentist, an RDHAP may, upon the prescription of a dentist or a physician and surgeon licensed in California, perform the duties assigned to a registered dental hygienist by Section 1088(c).

(d) All prescriptions shall contain the following information:

- (1) The preprinted name, address, license number, and signature of the prescribing dentist, or physician and surgeon.
 - (2) The name, address and phone number of patient, as well as, the specific services and any special instructions.
 - (3) The date the services are prescribed and the expiration date of the prescription.
- Prescriptions shall be maintained as a part of the patients permanent RDHAP records. If during the

course of providing treatment prescribed by a dentist or physician and surgeon a temporary restoration becomes dislodged or an elastic separator comes off, an RDHAP may re-cement the temporary restoration or replace the elastic separator upon the verbal or written approval of a dentist or physician and surgeon.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Section 1614 and 1768, Business and Professions Code.

1090.1. RDHAP Documentation of Dentist Relationship

Prior to the establishment of an independent practice, an RDHAP shall provide to the board documentation of an existing relationship with at least one dentist for referral, consultation, and emergency services, on the form titled: Documentation of RDHAP Relationship with Dentist, (rev.5/99), which is hereby incorporated by reference . The dentist's license shall be current, active and not under discipline by the board. Any changes shall be reported to the Board in writing, within 30 days following such change.

Note Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1770, Business and Professions Code.

TABLE OF PERMITTED DUTIES (Rev. 3/20/03)

Following is a table of duties which auxiliaries are allowed to perform in California. If a duty is not listed, auxiliaries are NOT allowed to perform the duty. Under each category of auxiliary is one of the following notations: "N", "D", or "G".

"N" = means that the auxiliary is NOT permitted to perform the duty.

"D" = means that the auxiliary may perform the duty under the Direct supervision of a dentist, which means supervision of dental procedures based on instructions given by a licensed dentist who must be physically present in the treatment facility during the performance of those procedures. The duty must be performed pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures must be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

"G" = means that the auxiliary can perform the duty under the General supervision of a dentist, which means based on instructions given by a licensed dentist, but not requiring the physical presence of the supervising dentist during the performance of those procedures.

Note: An RDHAP may perform any duty that an RDH is allowed to perform under general supervision, provided that a prescription for hygiene services has been issued by a dentist or physician.

*Those duties marked by an asterisk * may be performed by an RDH without supervision if they are employed in a public health program created by federal, state, or local law or administered by a federal, state, county or local governmental entity.

For the actual text of the laws and regulations, download COMDA's publication of laws and regulations from www.comda.ca.gov

DUTY	SECTION OF LAW (Statute or Regulation)	D A	R D A	R D A E F	R D H	R D H E F
Anesthesia, local , administration of (RDH/RDHEF's must FIRST complete a Board-approved course)	1761	N	N	N	D	D
Arch wires , place and ligate	1086d10/1760	N	D	D	G	G
Arch wires , remove	1085c12/1760	D	D	D	G	G
Bands , loose, check for	1085c11/1760	D	D	D	G	G
Bands , orthodontic, remove	1086d8/1760	N	D	D	G	G
Bands , size	1086d6/1760	N	D	D	G	G
Bases , place on sound dentin	1086d4/1760	N	D	D	G	G
Bite registrations , for diagnostic models for case study only, take	1086d14/1760	N	D	D	G	G
Bleaching agents , apply and activate with non-laser light-curing device	1086d12/13/1762	N	D	D	G	G
Bleaching trays , take impressions for	1085c1/1762	D	D	D	G	G
Bonding , prepare enamel for bonding by etching	1087c4/1089c4	N	N	D	N	D
Canals , dry with absorbent points	1086d2/1760	N	D	D	G	G
Cement , remove excess from coronal surfaces of teeth under orthodontic treatment by means of an ultrasonic scaler (RDA/RDAEF's must FIRST complete a Board-approved course)	1086d16/1762	N	D	D	G	G
Cement , remove excess from coronal surfaces of teeth under other than orthodontic treatment by means of an ultrasonic scaler	1762	N	N	N	G	G
Cement , remove excess from supragingival surfaces of teeth with hand instrument or floss	1086d5/1762	N	D	D	G	G
Cement , remove excess from subgingival tooth surfaces with a hand	1087c8/1762	N	N	D	G	G

DUTY	SECTION OF LAW (Statue or Regulation)	D A	R D A	R D A E F	R D H	R D H E F
instrument						
Cord retraction of gingivae for impression procedures	1087c1/1089c1	N	N	D	N	D
Coronal polishing (RDA/RDAEF's must FIRST complete a Board-approved course) a DDS or RDH must first determine that the teeth to be polished are free of calculus or other extraneous material prior to polishing *	1086d15/1762	N	D	D	G	G
Crowns , intra-orally fabricate temporary	1086d7/1760	N	D	D	G	G
Crowns , size stainless steel temporary	1086d6/1760	N	D	D	G	G
Crowns , sizing , temporary cementation and removal of temporary crowns	1086d6&8/1760	N	D	D	G	G
Cure restorative or orthodontic materials in operative site with light-curing device	1085c17/1760	D	D	D	G	G
Dressings , post-extraction and periodontal, place	1086d11/1762	N	D	D	G	G
Enamel , prepare for bonding by etching	1087c4/1089c4	N	N	D	N	D
Endodontic cultures , obtain	1086d1/1760	N	D	D	G	G
Endodontic filling points , fit trial	1087c6/1089c6	N	N	D	N	D
Endodontic post and core castings , formulate indirect patterns for	1087c5/1089c5	N	N	D	N	D
Etchant , apply for bonding restorative materials	1087c9/1089c7	N	N	D	N	D
Etching , prepare enamel for bonding by etching	1087c4/1089c4	N	N	D	N	D
Examination , mouth-mirror inspection of oral cavity, including charting of obvious lesions, existing restorations, and missing teeth (also see Examination below)	1086c1/1762	N	G	G	G	G
Examination , preliminary, including but not limited to periodontal charting, intra and extra-oral examination of soft tissue, classifying occlusion, myofunctional evaluation (also see Examination above) *	1762	N	N	N	G	G
Extra-oral duties or functions specified by the supervising dentist	1085b1/1760	G	G	G	G	G
Fit trial endodontic filling points	1087c6/1089c6	N	N	D	N	D
Fluoride , topical, apply, after scaling and polishing by DDS or RDH *	1085c14/1762	D	D	D	G	G
Impressions for cast restorations, take	1087c2/1089c2	N	N	D	N	D
Impressions for diagnostic and opposing models, take	1085c1/1760	D	D	D	G	G
Impressions for bleaching trays, temporary crowns and bridges and sports guards, take	1085c1/1760/1762	D	D	D	G	G
Impressions for space maintainers, orthodontic appliances, and occlusal guards, take	1087c3/1089c3	N	N	D	N	D
Indirect patterns for endodontic post and core casting , formulate	1087c5/1089c5	N	N	D	N	D
Intra-oral measurements for orthodontic procedures, take	1085c9/1760	D	D	D	G	G
Irrigate subgingivally with an antimicrobial and/or antibiotic liquid solutions(s) *	1762	N	N	N	G	G
Ligature ties , remove	1085c13/1760	D	D	D	G	G
Lime deposits , accretions and stains –removal from the unattached surfaces of the teeth *	1762	N	N	N	G	G
Liners , place on sound dentin	1086d4/1760	N	D	D	G	G
Local anesthesia , administration of (must FIRST complete a Board-approved course)	1761	N	N	N	D	D
Matrices , anterior, hold	1085c7/1760	D	D	D	G	G
Matrices , place, wedge or remove	1085c16/1760	D	D	D	G	G
Mouth-mirror inspection of the oral cavity, including charting of obvious lesions, existing restorations, and missing teeth	1086c1/1762	N	G	G	G	G
Nitrous oxide analgesia/sedation , assist under specified conditions	1085c6/1761	D	D	D	D	D
Nitrous oxide and oxygen , administration, whether alone or in combination with each other (must FIRST complete a board-approved course)	1761	N	N	N	D	D
Oral cavity , mouth-mirror inspection of, including charting of obvious lesions, existing restorations, and missing teeth	1086c1/1762	N	G	G	G	G

DUTY	SECTION OF LAW (Statue or Regulation)	D A	R D A	R D A E F	R D H	R D H E F
Oral exfoliative cytology *	1762	N	N	N	G	G
Orthodontic appliances, examine	1085b3/1760	G	G	G	G	G
Orthodontic bands, remove	1086d8/1760	N	D	D	G	G
Orthodontic or restorative materials, cure in operative site with light curing device	1085c17/1760	D	D	D	G	G
Orthodontic procedures, take intraoral measurements for	1085c9/1760	D	D	D	G	G
Orthodontic separators, elastic, place	1085c4/1760	D	D	D	G	G
Orthodontic separators, other than elastic, place	1086d9/1760	N	D	D	G	G
Orthodontic separators, remove	1085c5/1760	D	D	D	G	G
Periodontal dressings, place	1086d11/1762	N	D	D	G	G
Periodontal dressings, remove	1085c3/1762	D	D	D	G	G
Periodontal soft tissue curettage (RDH/ RDHEFs must FIRST complete a Board approved course)	1761	N	N	N	D	D
Pit and fissure sealants, apply *	1087c7/1762	N	N	D	G	G
Post-extraction dressings, place	1086d11/1760	N	D	D	G	G
Post-extraction dressings, remove	1085c3/1760	D	D	D	G	G
Pulp vitality, test	1086d3/1760	N	D	D	G	G
Radiographic equipment, operation of (must FIRST complete a Board-approved radiation safety program)	1085b2	G	G	G	G	G
Restorations, permanent, place or finish	1085	N	N	N	N	N
Restorations, polish and contour for preventive purposes	1762	N	N	N	G	G
Restorative or orthodontic materials, cure in operative site with light-curing device	1085c17/1760	D	D	D	G	G
Retainers and headgear, seat adjusted , including appropriate instructions	1085c10/1760	D	D	D	G	G
Root planing *	1762	N	N	N	G	G
Rubber dams, place and remove	1085c15/1760	D	D	D	G	G
Scaling, subgingival *	1762	N	N	N	G	G
Screenings, oral health *	1762	N	N	N	G	G
Sealants, pit and fissure, apply *	1087c7/1762	N	N	D	G	G
Soft tissue curettage, periodontal (RDH/ RDHEFs must FIRST complete a Board-approved course)	1761	N	N	N	D	D
Sports guards, take impressions for	1085c1/1760	D	D	D	G	G
Stainless steel crowns (temporary), size	1086d6/1760	N	D	D	G	G
Stains, lime deposits, and accretions – removal from the unattached surfaces of the teeth	1762	N	N	N	G	G
Sutures, place	1085a2	N	N	N	N	N
Sutures, remove	1085c8/1760	D	D	D	G	G
Temporary crowns, fabricate intra-orally	1086d7/1760	N	D	D	G	G
Temporary crowns, size	1086d6/1760	N	D	D	G	G
Temporary crowns, temporary cementation and removal	1086d6&8/1760	N	D	D	G	G
Temporary crowns and bridges, take impressions for	1085c1/1760	D	D	D	G	G
Temporary sedative dressings, place and/or remove	1086c2/1760	N	G	G	G	G
Tetracycline cord, place and/or remove	1085a	N	N	N	N	N
Topical agents, apply non-aerosol and non-caustic (also see Topical Agents below) *	1085c2/1762	D	D	D	G	G
Topical agents essential to complete prophylaxis, apply (also see Topical Agents above) *	1762	N	N	N	G	G

DUTY	SECTION OF LAW (Statue or Regulation)	D A	R D A	R D A E F	R D H	R D H E F
Topical fluoride , apply after scaling and polishing by DDS or RDH *	1085c14/1762	D	D	D	G	G
Trial endodontic filling points , fit	1087c6/1089c6	N	N	D	N	D
Ultrasonic scaler , removal of excess cement from coronal surfaces of teeth under orthodontic treatment with (must FIRST complete a Board-approved ultrasonic scaler course)	1086d16/1760	N	D	D	G	G